[redacted]

[redacted]

[redacted]

[redacted]

[redacted]

[redacted]

[redacted]

To the Party

BARNET
LONDON BOROUGH

NHS
Barnet


Our Ref
Your Ref
Direct Line: 020 8937 7173
e-mail: pete@barnet.nhs.uk

web: www.barnet.nhs.uk

Date: 30th June 2009

Westgate House
Edgware Community Hospital
Burnt Oak Broadway
London
HA8 0AD

Tel 020 8952 2381
Fax 020 8937 7727


**To parents and carers of children attending Bess Somh Schneirer**

Dear parent/carer

**Swine flu infection**

A small number of people in local schools have been affected by swine flu. This infection has now affected people in a number of schools in London and it seems to be becoming more common. Our current expor ence is that, n the vast majority of instances, this is a relatively mild, short-lived infection that is s milar to seasonal flu.

When a school is affected we are working with the school to assess the risk to others and the affected school, to help us decide what needs to be done. If a number of staff are off sick and it is not possible to provide proper supervision for pupils, a school will be temporarily closed. However where there are enough staff a school will not necessarily close.

Where an increasing number of people in the general community are getting swine flu then the risk of a child getting swine flu can be as high if they are at home as it is if they are at school. In such circumstances, there is likely to be little benefit in closing a school. This applies especially in London where many more people are getting swine flu at the mo ment but this is not the case in a number of other places in the country where the number of people being affected by swine flu is currently lower.

It is very important that children with flu-like symptoms should stay off school and away from others outside their own home and anyone diagnosed with swine flu should do so for seven days from when their symptoms began.

If you need advice about your child or anyone in your family who you think may be developing swine flu, please contact your GP surgery by telephone. I realise that many people are worried about this, but our experience in Barnet, like that elsewhere, is that this s an unpleasant but not especially serious infection that is very much like ordinary flu.

Yours sincerely

Dr Andrew Burnett
*Medical Director / Director of Health Improvement*

Robert McCulloch-Graham
*Director of Children's Services*

Test fax. Test fax. Test fax. Test fax. Test fax. Test fax. Test fax. Test fax. Test fax. Test fax. Test fax.

Test fax. Test fax. Test fax. Test fax. Test fax. Test fax. Test fax. Test fax. Test fax. Test fax. Test fax.

# Parents Helping Parents: Demystifying the Gifted Program

Join ABC Ottawa and parents from various OCDSB gifted centres for an information evening where you can find answers to your questions.

What does "gifted identification" mean?
What does "placement" mean?
What is an IPRC and an IEP?
What are my child's placement options?
What are the advantages and disadvantages of the different options?

When: Tuesday, January 28, 2014
Time: 7:00 pm - 9:00 pm

Where: McNabb Recreation Centre
Main Hall
180 Percy St, Ottawa

The Association for Bright Children of Ontario
Ottawa Chapter

Web: http//www.abcontario.ca/ottawa
Email: ABCOttawa@abcontario.ca
Phone: (613) 860-1398

# Happy Fake Clinic

Wilma Flintstone

2012-02-09

I understand that I am receiving narcotics from Dr Frankenstein to treat my pain I agree to the following conditions under which the medication is prescribed

- I will take my narcotic medication(s) at the dose and frequency prescribed
- I will not seek narcotic medication(s) from another physicians Only Dr *F* will prescribe stop writing my narcotic medication(s) prescriptions for me
- I also agree to random urine drug testing If I am found to be using illicit (illegal) drugs or narcotic medications not prescribed for me as above, this alone may/will result in the loss of privilege to receive these medications at the clinic

By signing this contract I allow my doctor to share information regarding my use of narcotic medication(s) with other community physicians, pharmacies, emergency departments, or any health professional

Patient _____ Signed 2012-02-09

Witness _____ Signed 2012 02-09

Notes Section

a This service is paid at 100% of the Medicare

b Routine examinations and related services

c The following policies were used when v
L30574

d A local medical review policy (LMR
we made this decision An LMRP
particular item or service is cover
from your local intermediary or
information box on page one.
set out in the LMRP/LCD to
change our decision

Deductible Information

You have met the Par

General Information

You have the ri
Medicare Item
other health s
if you would

Compare t
If you ha
needed
Inform

If yo
nov
th

Some doctors still charge illegal co-payments

Free Medicare Summary Notices
Medicare patients
can receive free
on-line access

# Windows Printer Test Page

Congratulations!

If you can read this information, you have correctly installed your HP officejet 4500 G510a-f on OWNER-HP

The information below describes your printer driver and port settings.

```
Submitted Time:  4:56:18 PM 3/14/2011
Computer Name:   OWNER-HP
Printer Name:    HP Officejet 4500 G510a-f
Printer Model:   HP Officejet 4500 G510a-f
Color Support:   Yes
Port Name(s):    USB002
Data Format:     RAW
Share Name:
Driver Name:     UNIDRV.DLL
Data File:       hpw450a3.gpd
Config File:     UNIDRVUI.DLL
Help File:       UNIDRV.HLP
Driver Version:  6.00
Environment:     Windows x64
Monitor:         PCL hpf3170w.dll

Additional files used by this driver:
  C:\Windows\system32\spool\DRIVERS\x64\3\hpw450as.ini
  C:\Windows\system32\spool\DRIVERS\x64\3\hpfst70w.dll    (70.091.411.00)
  C:\Windows\system32\spool\DRIVERS\x64\3\hpw450a3.vdf
  C:\Windows\system32\spool\DRIVERS\x64\3\hpw450a3.xml
  C:\Windows\system32\spool\DRIVERS\x64\3\hpfsc70w.dtd
  C:\Windows\system32\spool\DRIVERS\x64\3\hpfh170w.cab
  C:\Windows\system32\spool\DRIVERS\x64\3\hpfui70w.dll    (70.091.411.00)
  C:\Windows\system32\spool\DRIVERS\x64\3\hpfvu70w.dll    (70.091.411.00)
  C:\Windows\system32\spool\DRIVERS\x64\3\hpw450a3.dll    (70.091.411.00)
  C:\Windows\system32\spool\DRIVERS\x64\3\hpfav70w.dll    (70.091.411.00)
  C:\Windows\system32\spool\DRIVERS\x64\3\hpfsm70w.gpd
  C:\Windows\system32\spool\DRIVERS\x64\3\hpf3m70w.gpd
  C:\Windows\system32\spool\DRIVERS\x64\3\hpf3r70w.dll    (70.091.411.00)
  C:\Windows\system32\spool\DRIVERS\x64\3\hpfrs70w.dll    (0.3.04.003)
  C:\Windows\system32\spool\DRIVERS\x64\3\hpfhs70w.dll    (0.3.06.001)
  C:\Windows\system32\spool\DRIVERS\x64\3\hpw450a3.cfg
  C:\Windows\system32\spool\DRIVERS\x64\3\UNIRES.DLL      (6.1.7600.16385
(win7_rtm.090713-1255))
  C:\Windows\system32\spool\DRIVERS\x64\3\STDNAMES.GPD
  C:\Windows\system32\spool\DRIVERS\x64\3\hpfpr70w.dll    (70.091.411.00)
  C:\Windows\system32\spool\DRIVERS\x64\3\HPCDMC64.DLL    (1,0,2,38)

This is the end of the printer test page
```

Wells Fargo Bank, N.A.
P.O. Box 29704
Phoenix, AZ 85038-9704

Wells Fargo Dealer Services
P.O. Box 29704
Phoenix, AZ 85038-9704

[redacted]

[redacted]

[redacted]

1855-330-1239

Test

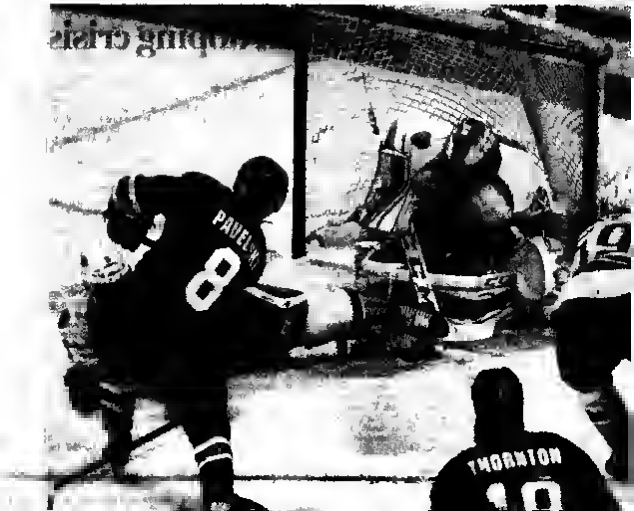
# Sports

Page 2
Kenya Russia track could get ban from Olympics for doping

WWW.MERCURYNEWS.COM || WWW.EASTBAYTIMES.COM

Sharks 5, Predators 0

# MEET THEM IN ST. LOUI



TEST FAX!!!
TEST FAX!!!
TEST FAX!!!
TEST FAX!!!

## LIMITED WARRANTY

A **LIMITED WARRANTY.** If you follow the instructions and the software is properly licensed the software will perform substantially as described in the Microsoft materials that you receive in or with the software.

B **TERM OF WARRANTY; WARRANTY RECIPIENT; LENGTH OF ANY IMPLIED WARRANTIES.** The limited warranty covers the software for one year after acquired by the first user. If you receive supplements, updates, or replacement software during that year, they will be covered for the remainder of the warranty or 30 days, whichever is longer. If the first user transfers the software, the remainder of the warranty will apply to the recipient.

**To the extent permitted by law, any implied warranties, guarantees or conditions last only during the term of the limited warranty.** Some states do not allow limitations on how long an implied warranty lasts, so these limitations may not apply to you. They also might not apply to you because some countries may not allow limitations on how long an implied warranty, guarantee or condition lasts.

C **EXCLUSIONS FROM WARRANTY.** This warranty does not cover problems caused by your acts (or failures to act), the acts of others, or events beyond Microsoft's reasonable control.

D **REMEDY FOR BREACH OF WARRANTY.** **Microsoft will repair or replace the software at no charge. If Microsoft cannot repair or replace it, Microsoft will refund the amount shown on your receipt for the software. It will also repair or replace supplements, updates and replacement software at no charge. If Microsoft cannot repair or replace them, it will refund the amount you paid for them, if any. You must reinstall the software and return any media and other associated materials to Microsoft with proof of purchase to obtain a refund. These are your only remedies for breach of the limited warranty.**

E. **CONSUMER RIGHTS NOT AFFECTED.** **You may have additional consumer rights under your local laws, which this agreement cannot change.**

F **WARRANTY PROCEDURES.** You must proof of purchase for warranty service.

1. **United States and Canada.** For warranty service or information about how to obtain a refund for software acquired in the United States and Canada, contact Microsoft at:

   (800) MICROSOFT,

   Microsoft Customer Service and Support, One Microsoft Way, Redmond, WA 98052-6399, or

   visit http://www.microsoft.com/info/mareturns.htm

2. **Europe, Middle East and Africa.** If you acquired the software in Europe, the Middle East or Africa, Microsoft Ireland Operations Limited makes this limited warranty. To make a claim under this warranty, you should contact either:

   Microsoft Ireland Operations Limited, Customer Care Centre, Atrium Building Block B, Carmanhall Road, Sandyford Industrial Estate, Dublin 18, Ireland, or

Hello World!

test

**Fax To:** berkeleyinn
**Fax:** +1(888)-877-1658
**Attn:** Berkeleyinn Berkeleyinn
**Subject:** Booking Confirmation

| Reservation Confirmation |
|---|
| B8754E7E-6758-311 |
| Created: 05/09/2013 12:53:01 GMT |

Dear Berkeleyinn Berkeleyinn,

We have received the following reservation for your property and are transmitting this Reservation Confirmation via facsimile. If you have any questions regard ng this reservation please contact our Reservation Support Team at Tel: 1-800 767-4567 or Email:support@Innsight.com

Thank You
INNsight.com

**GUEST INFO**

It is your obligation to safeguard this fax and keep this guest's credit card information secure in accordance with your internal security procedures

| | | | |
|---|---|---|---|
| Booked by: | Mr. Jayesh | State: | Infinitive |
| Address: | Hellworld | Zip code: | 213214234 |
| City: | ewrtewyfdw | Country: | AFGHANISTAN |
| Email Address: | nihul.patel@innsight.com | Telephone Number: | 12423253635487 |

**BILLING INFORMATION**

| | | | |
|---|---|---|---|
| Credit Card: | Visa | Expiry Date: | 2013 1 |
| Credit Number: | 4111111111111111 | Grand Total: | 17.00 |

**ROOM DETAILS**

| | | | |
|---|---|---|---|
| Number of Rooms: | 1 | Number of Nights: | 1 |
| Check in Date: | May 9, 2013 | Check Out Date: | May 10, 2013 |

**Room 1: Queen Room** — Adults: 2 Children: 0

| | | | |
|---|---|---|---|
| First Name: | Yest | Last Name: | Test |

| Room Details: | | |
|---|---|---|
| | Date: | May 9 |
| | Rate: | $ 17.00 |

Sub-Total: $17.00
Tax [0.00%]: $0 = Total: $ 17.00

Note: Rates Include Extra Person/Child Fees
Deal: $2.00 off on Queen Room

Special Request: test

Thanks for selecting INNsight.com as your partner

EPSON
EXCEED YOUR VISION

# Congratulations, you have successfully installed your new Epson printer!

Here are some tips for getting great prints:

- Genuine Epson inks have been engineered to deliver stable, long-lasting photographic quality when used with Epson papers.
- To protect your photos, frame them under glass or store them in archival sleeves or albums. Your prints will last for generations!
- Epson offers an extensive line of specialty papers that provide outstanding results when used with Epson printers and genuine Epson ink.
- For best results, make sure the paper type selected in your printer software is right for the type of paper loaded in the printer. See your documentation for more information.

## Drivers & Support

Downloads, FAQs,
Help, and more—

Get quick answers to your questions by going to **epson.com/support** and choosing your product. There you'll find FAQs, documentation, interactive troubleshooting guides, and an easy way to e-mail Epson.

[redacted]

[illegible]
[illegible]

Char-Broil

Grilling's Juicy Little Secret™

# PRODUCT GUIDE
# MODEL 463436213

## Classic C-453

IMPORTANT: Fill out the product record information below

Serial Number: _____
See rating label on grill for serial number

Date Purchased: _____

For support and to register your grill please visit us at **www.charbroil.com**

If you have questions or need assistance during assembly please call **1-800-241-7548**

FAX TO 4

LONS

DISTANCE

TEST

20131105

Monday, November 23, 2015

| Reservation Confirmation |
| --- |
| [redacted] |
| Created [redacted] |
| Booking between [redacted] |

[redacted]

Dear Mr. [redacted],

Thank you for choosing [redacted] for your travel needs. Please review your itinerary below. If you have any questions or need to make changes, please contact our Reservations Support Team at [redacted]. We look forward to assisting you with your next trip.

Sincerely,
[redacted]

## Customer Information

Please verify that all information is correct and keep this portion of your travel documents with you. Any discrepancies may result in boarding delays or denial.

| Booked By | [redacted] | Status | Confirmed |
| --- | --- | --- | --- |
| Address | [redacted] | Phone | [redacted] |
| Fax | [redacted] | Email | [redacted] |
| Email Address | [redacted] | Frequent Flyer # | [redacted] |

## Flight Information

| Departure | [redacted] | Arrival | [redacted] |
| --- | --- | --- | --- |
| Departure | [redacted] | Arrival | [redacted] |

## Passenger Information

| Number of Adults | [redacted] | Number of Infants | [redacted] |
| --- | --- | --- | --- |
| Class of Service | [redacted] | Seat Preference | [redacted] |

| Last Name | First | Last Name | First |
| --- | --- | --- | --- |
| [redacted] | [redacted] | [redacted] | [redacted] |

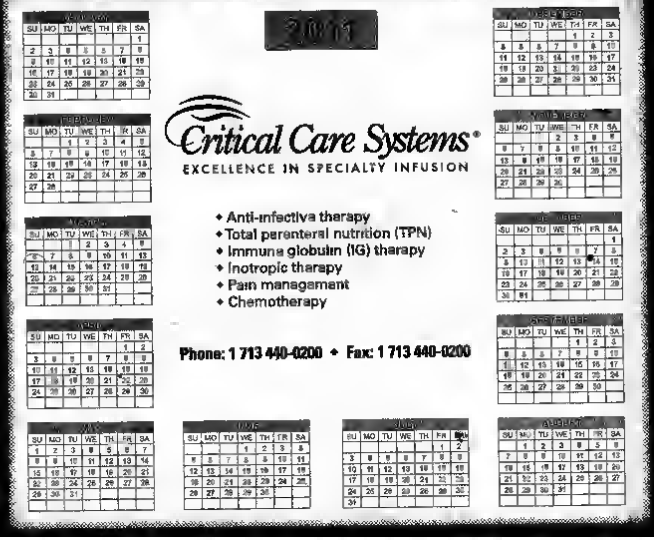
| Name Change | Date | Fee |
| --- | --- | --- |
| | Daily | $ [redacted] |

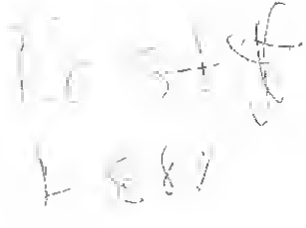
Total Fare $[redacted]
Taxes, Fees and Charges $[redacted] Total $[redacted]

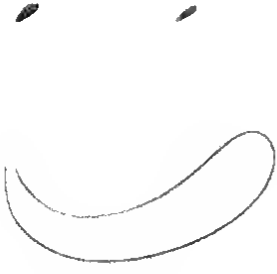
Value Plus members receive Priority Check-in and Priority Boarding

Special Requests

[redacted]


2011
JANUARY
FEBRUARY
MARCH
APRIL
MAY
JUNE
JULY
AUGUST
SEPTEMBER
OCTOBER
NOVEMBER
DECEMBER
Critical Care Systems®
EXCELLENCE IN SPECIALTY INFUSION
• Anti-infective therapy
• Total parenteral nutrition (TPN)
• Immune globulin (IG) therapy
• Inotropic therapy
• Pain management
• Chemotherapy
Phone: 1 713 440-0200 • Fax: 1 713 440-0200





TRANSMISSION VERIFICATION REPORT

TIME 08/24/2012 11:59
NAME
FAX
TEL
SER.# U62782C2N564585

| | |
|---|---|
| DATE,TIME | 08/24 11:58 |
| FAX NO./NAME | 12123986934 |
| DURATION | 00:00:39 |
| PAGE(S) | 00 |
| RESULT | NG |
| MODE | STANDARD |

NG POOR LINE CONDITION / OUT OF MEMORY

TEST

Test Fax
Please Ignore, Thank You.

HAM

| Beginning odometer reading | Ending odometer reading | Mileage to first appointment from residence | Mileage from last appointment to residence | Total business miles | Total personal miles |
|---|---|---|---|---|---|

Monday Date:

Business purpose:

Tuesday Date:

Business purpose:

Wednesday Date:

Business purpose:

Thursday Date:

Business purpose.

Friday Date:

Business purpose:

Saturday Date:

Personal Mileage:

Total Personal Mileage:

Sunday Date:

Personal Mileage:

Please refer to the Edwards First Policy Manual, Sections 28, 28.1 for personal mileage reporting requirements.


| Beginning odometer reading | Ending odometer reading | Mileage to first appointment from residence | Mileage from last appointment to residence | Total business miles | Total personal miles |
|---|---|---|---|---|---|

Monday Date:

Business purpose:

Tuesday Date:

Business purpose:

Wednesday Date:

Business purpose

Thursday Date:

Business purpose

Friday Date:

Business purpose

Saturday Date:

Personal Mileage:

Total Personal Mileage:

Sunday Date:

Personal Mileage:

Please refer to the Edwards First Policy Manual, Sections 28, 28.1 for personal mileage reporting requirements.

# CHART

9326

FAX

TEST

#2

Test Fax

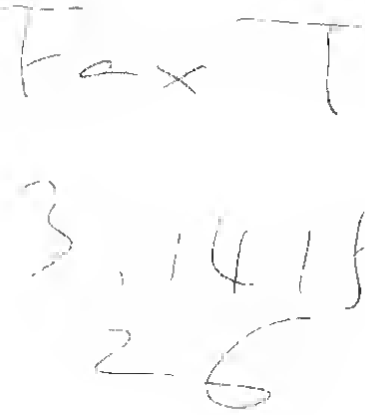
TESTARIA

TESTARIA

STELARIA

ML

1855-330-1239


Fax T
3.1415
26

# FAX

To: +60320011300

Company:

Department:

Fax number: +60320011300

Date: 04/06/13

Total number of pages: 1

From: MR Chan Min

Subject: TEST MARCELO CHAN

# TEST SP2 Production

# FAX

**To:** test
Company
Fax 818553301239
Phone

**From:** test
Fax 5551212
Phone 5551212
E mail Alex.Hall@ffh.com

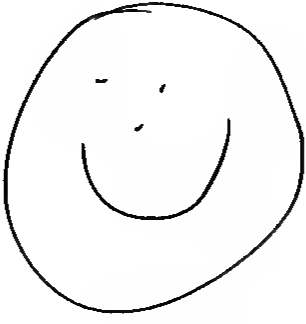
---

**NOTES:**

zdfsdvsd

---

**Date and time of transmission** Tuesday, May 2, 2017 12:14:46 AM
**Number of pages including this cover sheet** 01



985-8919

TEST FAX!

TEST

Fat 1

Lil B is the best rapper alive

test.

Birch

Test

# CORN PUDDING

1/4 CUP OF SUGAR

2 TABLESPOON ALL PURPOSE FLOUR

2 TEASPOON BAKING POWDER

SALT TO TASTE

6 LARGE EGGS

2 CUPS OF HEAVY CREAM

¼ CUP OF BUTTER OR MARGARINE MELTED

6 CUPS OF FRESH OR FROZEN CORN KERNELS (12 EARS)

1 TABLESPOON DICED RED PERPPERS

1 TABLESPOON DICED GREEN PEPPERS

COMBINE THE FIRST FLOUR. BEAT TOGETHER EGGS, HEAVEY CREAM, AND BUTTER WITH WISK GRADUALLY ADD THE SUGAR MIXTURE, BEATING UNTIL SMOOTH. STIR IN CORN, RED PEPPER AND BELL PEPPER. POUR INTO A LIGHTLY GREASED 13X 9 INCH BAKING DISH BAKE AT 350 DEGREES UNTIL GOLDEN BROWN OR UNTIL KNIFE INSERTED INTO CENTER COMES OUT CLEAN, ABOUT 45 MINUTES LET COOL 5 MINUTES BEFORE SERVING

test

**NEUBERT,
PEPE &
MONTEITH, P.C.**
Attorneys At Law

195 Church Street 13th Floor
New Haven, Connecticut 06510
Telephone (203) 821-2000
Facsimile (203) 821-2009
www.npmlaw.com

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Judy K. Weinstein
Peter T. Fay
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Robert T. Gradwell
Nancy Bohan Kinsella
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Of Counsel
Patrick J. Lapera
Gregory J. Sparano

Norman H. Kramer (1920-2013)

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1180 Post Road, Suite 205
Fairfield, CT 06824

1 Liberty Square #500
New Britain, CT 06050

777 Westchester Avenue, Suite 101
White Plains, NY 10604

Test

1855-330-1239

Test

Test

# 2010 -PATIENT DATA SUBMISSION DEADLINES

For inclusion in **2010 Incentive rewards programs**, these health plans have announced the following DEADLINES for submission of Unmet Measures patient data

- **BCN** – All data for inclusion in the 2010 PRP (Physician Recognition Program) and the final Pay As You Go payout must be submitted to Health e-Blue by **January 7, 2011**

- **GREAT LAKES HEALTH PLAN** – Services credited for 2010 rewards incentives must be provided by **December 31, 2010** and billed for or forwarded via fax to (248) 331-4519 in a timely manner

- **HEALTH PLAN OF MICHIGAN** – Data for 2010 rewards incentives must be billed for or submitted to HPM Quality Services Fax # (313) 202-0006 no later than February 28, 2011

- **Priority Health Plan** – Data for the 2010 PIP (Partners in Performance) incentive program must be entered into Priority's Patient Profile data base by **January 31, 2011** and will be subject to audit

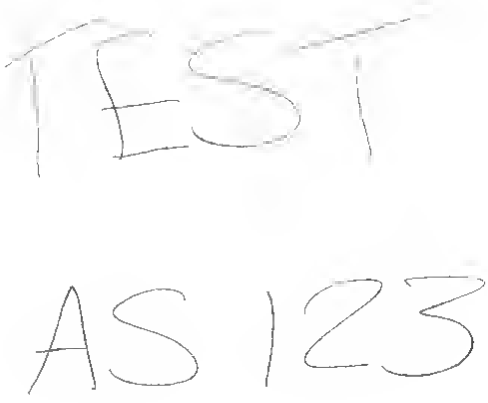
- ***BCBSM (PGIP)*** – patient data is received via ongoing claims submissions and MCIR.

**Offices are reminded to bill for all services provided, whether you are paid for them or not; so health plans are able to capture data for Quality reporting and incentive purposes.**

11/22/2010

# A subpoena has been reviewed

Dear Madam/Sir,
Please see attached for Uber Technologies, Inc.'s response to your subpoena.
Regards
Uber Legal Team


TEST
AS 123

I Hope This
Damn Machine Works

07/20/2012 15:59
Serial No. D10F011000228
TC 11454e

| | | | |
|---|---|---|---|
| Service Center Fax No. | | | |
| Device Name | MMFT-200 | | |
| Total Counter | 00114546 | Total Duplex Counter | 00017438 |
| No. of Originals | 00112790 | No. of Prints | 00094607 |

| | | | |
|---|---|---|---|
| Copy | | Total | Large Size |
| | Black | 0070720 | 0000057 |
| Print | | Total | Large Size |
| | Black | 0041109 | 0000000 |
| Total (Copy + Print) | Black | 0111829 | |

| | | | |
|---|---|---|---|
| Scan/Fax | | Total | Large Size |
| | Black<br>Scans | 0002717<br>0008976 | 0000000<br>0000002 |
| | Fax TX<br>Fax RX | 00007317<br>00000296 | |

| | | | | | |
|---|---|---|---|---|---|
| Maintenance Counter | Maint. Count<br>Maint. Set<br>Count Start day | 11661e<br>000000<br>00/00/1998 | | | |
| Coverage Rate | Black<br>Coverage Rate | | | | |
| | | Copy (%) | Print (%) | Scan/Fax (%) | Total (%) |
| | Black | 0.222 | 3.766 | 0.034 | 0.514 |

| Paper Size Registered | No. | Paper Size | Paper Type | Count |
|---|---|---|---|---|
| | 01 | 11x17 | --- | 00000042 |
| | 02 | 8½x14 | --- | 00000247 |
| | 03 | 8½x11 | --- | 00097556 |
| | 04 | 5½x8½ | --- | 00000000 |
| | 05 | A3 | --- | 00000001 |
| | 06 | B4 | --- | 00000000 |
| | 07 | B5 | --- | 00000000 |
| | 08 | A4 | --- | 00000106 |
| | 09 | A5 | --- | 00000000 |
| | 10 | Others | --- | 00000001 |

Note

**made our determination of insurability and we direct ATS to issue the title commitment after making the followieg amendments.**

testing



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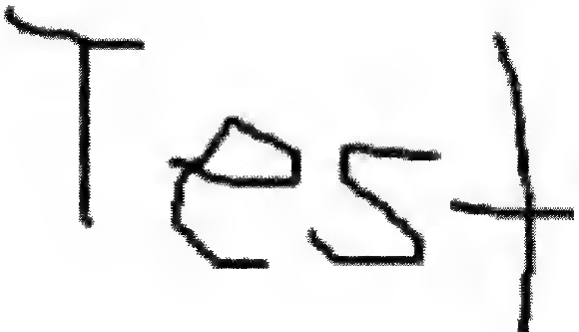

Test

Signature

Date _____

Lawrence, Kansas, PH: 4785

| Confirmation Confirmation |
| --- |
| [illegible] |
| Created: [illegible] |

Greetings [illegible],

[illegible]

Thanks!
[illegible]

| [illegible] |
| --- |
| [illegible] |

| Room Details | | | |
| --- | --- | --- | --- |
| [illegible] | | [illegible] | [illegible] |
| [illegible] | [illegible] | [illegible] | [illegible] |

| [illegible] | [illegible] | [illegible] | [illegible] |
| --- | --- | --- | --- |
| [illegible] | [illegible] | [illegible] | [illegible] |

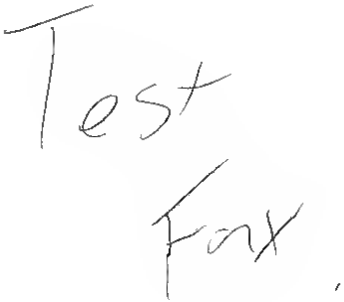
[illegible]

| Price Details | | |
| --- | --- | --- |
| [illegible] | [illegible] | |
| [illegible] | [illegible] | |

[illegible]

TEST

FAX


Test
Fax!

This is a test Microsoft word

07/11/2012 [illegible] 18479249502

05/30/2012 14:45 9413243283 MED IPC HOME HEALTH PAGE 01

6/07/2012 08:00 9724228219 PAGE 03/01

TEST

ONLY

PLS.

FAX BACK

TO

847-427-2168

TKS.

VIC

MAY 31' 2012 8:45PM NO.814 P.1

05/12/2008 01:02 18479249502 VIC PAGE 01/01

This is an experiment

Please don't burn yourself.

Please don't spill

Otherwise we won't be able to do this again

Add 4 oz of **COLD** water to top

COLD WATER COOLS TANK & RESETS THERMOSTAT

Close cover

Press down Heat.

Add powder to cup

Center cup under spout

After red light turns off, press Dispense

DRAIN COMPLETELY AFTER EACH USE.

Add 2 oz of cold water to cup.

Test

FAX

6th

# FAX COVER SHEET

| | |
|---|---|
| TO | To Whom it May Concern |
| COMPANY | Fax Toy |
| FAX NUMBER | 18698771655 |
| FROM | Adam Linett |
| DATE | 2013-02-05 18:00:52 GMT |
| RE | test |

## COVER MESSAGE

test

# I-LIEN LIEN SERVICE

## P.O. BOX 2135 SHINGLE SPRINGS, CA 95682-2135

HOW A LIEN WORKS: IF A VEHICLE IS IN YOUR POSSESSION AND SOMEONE OWES YOU MONEY FOR WORK, STORAGE, TOWING, REPAIRS OR AN ABANDONED VEHICLE, THEN YOU CAN DO A LIEN. YOU GET PAID OR YOU GET THE VEHICLE! JUST FILL OUT THIS DOCUMENT AND MAIL OR FAX IT BACK TO US

**PHONE: (530) 677-5364**

**TOLL FREE: (800) 808-5436**

**FAX: (530) 677-2821**

Attach your business card here OR fill out information:

Company Name _____

Mailing Address _____

City _____ State _____ Zip Code _____

Phone # (___) _____ Fax # (___) _____

Instructions:
1. Please make copies of this form for future use
2. Attach your business card or fill out information in the box above.
3. Name of person to call for questions _____
4. Physical location of vehicles if different from above:

Address _____

City _____ State _____ Zip Code _____ County _____

5. In order to claim repairs we need your Bureau of Automotive Repair (BAR) number _____
6. If you have a work order, please provide a copy
7. Be sure to fill out the vehicle information completely and accurately below
8. We need to know the damage on any vehicle year 2000 or newer. Be sure to circle it in the corresponding box.
9. Please print your name, sign and date this form at the bottom
10. If you would like to pay by credit card, fill out the credit card information below and fax form to us. If you would like to pay by check or money order mail form along with payment.

$40.00 for vehicles valued $4,000 or less
$80.00 for veh cles valued $4,000 or more
$100.00 for vessel valued $1500 or more
$50.00 for out-of-state plates (add to above)
Additional charges may apply

CAR #1

LICENSE # | STATE | REG YR | VEHICLE IDENTIFICATION NUMBER

NAME

| YEAR | MAKE | MODEL | BODY | STORAGE RATE PER DAY | TOWING | DATE IN | Date Repairs Finished | REPAIRS |
|---|---|---|---|---|---|---|---|---|
| | | | | $ | $ | | | $ |

POLICE TOW | POLICE DEPT. NAME | SOF / DAMAGE TO CAR CIRCLE ONE | Engine # (MC only)

YES | FRONT REAR ALL OVER STRIP BURN
NO | MOTOR TRANS R S DE L BS E NTER

**WHAT TYPE OF LIEN? CIRCLE ONE: UNDER $4000 OVER $4000**

CAR #2

LICENSE # | STATE | REG YR | VEHICLE IDENTIFICATION NUMBER

NAME

| YEAR | MAKE | MODEL | BODY | STORAGE RATE PER DAY | TOWING | DATE IN | Date Repairs Finished | REPAIRS |
|---|---|---|---|---|---|---|---|---|
| | | | | $ | $ | | | $ |

POLICE TOW | POLICE DEPT. NAME | SOF / DAMAGE TO CAR CIRCLE ONE | Engine # (MC only)

YES | FRONT REAR ALL OVER STRIP BURN
NO | MOTOR TRANS R S DE BS E NTER

**WHAT TYPE OF LIEN? CIRCLE ONE: UNDER $4000 OVER $4000**

CREDIT CARD VER FICATION CODE IS NEEDED ON AMERICAN EXPRESS ON FRONT OF CARD FOUR DIGITS MASTER CARD AND VISA ON BACK THREE DIGITS

**Credit Card # _ _ _ _ - _ _ _ _ - _ _ _ _ - _ _ _ _ (_ _ _)**

**Expiration Date Month _____ Year _____**

**What is the street number & zip code where the credit card bill is received? _____ /_____**

**Amount authorized to charge to your credit card $_____**

Notice to customers: We are referred to provide Vehicle Registration Services/ Lien Sale Service. Vehicle Verification Service) to the public, but our company is not a branch of the Department of Motor Vehicles. Informing our customers of this notice is required per section 11406(d) CVC. Lien holder / Customer authorizes above fees to be paid by I-Lien. There will be a $25.00 charge for any returned check. No refunds under any circumstances.

I authorize the above lien(s) to be done with the license # and vin # as verified from the vehicle
I will hold R.A.D. Inc. d.b.a. I-Lien harmless from any lawsuits, judgments or errors regarding all liens I-Lien completes.

Printed Name _____ Signature _____ Date _____

| | | | |
|---|---|---|---|
| | | | |
| | | | |

| | | | |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

Cancellation Policy
We have a 72 hour cancellation policy. If you cancel your reservation after the 72 hour period you will be charged the equivalent of one night's stay. If you cancel after the completion of the cancellation period or you fail to show up, you will be charged the full amount of your reservation. If you cancel your reservation after the 72 hour period but before your check-in date, we will be happy to refund your money minus the cost of one night's stay. Please note that we do not offer refunds for partial stays.

Patient Name: npwfasdc

Patient DOB: 01-01-984

Medical Record Number: 142

Date Of Service: 07-24-2014

Procedure: Shockwave Lithotripsy

Surgeon: Cicilo Glacy, PA

Patient DOB: 01 01 984

Patient Name: npwfasdc

**Indications:**

npwfasdc is a 50 year old Female with a history of nephrolithiasis currently with a 0.6cm Upper pole renal stone. None Options for management were discussed with the patient. The risks, benefits, and complications for extracorporeal lithotripsy were discussed with the patient.

Risks including but not limited to fractures, bleeding, hematoma, residual stone, recurrent stone, stent/ureteral need for further or additional procedures were discussed with the patient and they have asked me to proceed.

**Procedure:**

After appropriate General anesthesia was administered, the patient was positioned supine on the lithotripsy table. The stones were localized under fluoroscopy in both coronal and anteroposterior views. A total of 253 were delivered to the 0.6 Upper pole, renal.

Shockwaves were delivered at a rate of 235 and 235. There was excellent fragmentation of the 0.6 Upper pole, renal. The patient was awakened from anesthesia and taken to the recovery room in stable condition.

**Disposition:** The patient is to follow up in 1 week.

Test

TEXT
EAST

# ARBOR TREE EXPERTS

*Professional Residential Arborists*

**Mike McCabe**

248 Cedar Swamp Road Jackson, New Jersey 08527

Toms River Area (732) 240-6444 | Jackson Area (732) 928-4552 | Ft. Pleasant Area (732) 899-5565

Member
- Jackson Township Shade Tree Commission
- NJ Shade Tree Federation
- International Society of Arboriculture NJ Chapter

| PROPOSAL SUBMITTED TO | PHONE | DATE |
|---|---|---|
| STREET | BUSINESS PHONE | FAX |
| CITY | CELL PHONE | LOCATION COORDINATE |
| FREE ESTIMATES/FULLY INSURED CERTIFICATES AVAILABLE | NJ Home Improvement Contractor License # 13VH03852100 | E-MAIL ADDRESS |

We hereby submit specifications and estimates for (description)

**Visit arbortreeexpertsnj.com**

Experience the Mike McCabe Arbor Tree Spider Lift advantages Mini tracked, self propelled 80' x 82' ft. aerial lifts. Fit through 36" x 48" inch gates with extremely low ground pressure for over turf driving. No need for large trucks on lawns...no need to climb trees.

SUBTOTAL. _____

SALES TAX _____

TOTAL DUE. _____

NOTE. Estimate sheet will serve as your bill. If you wish to have Arbor Tree complete the work described above, simply retain estimate sheet. Payment is due upon completion of services. All work is to be completed in a workmanlike manner. If you wish to have additional work executed please notify our office and we will be glad to arrange it for you.

*Thank you for your patronage*

# Windows Printer Test Page

You have correctly installed your KONICA MINOLTA PS Color Laser Class Driver on OPERATIONS.

## PRINTER PROPERTIES

| | |
|---|---|
| Submitted Time: | 2:00:36 PM |
| Date: | 5/1/2018 |
| User Name: | OPERATIONS\Larry Birch |
| Computer Name: | OPERATIONS |
| Printer Name: | KONICA MINOLTA PS Color Laser Class Driver |
| Printer Model: | KONICA MINOLTA PS Color Laser Class Driver |
| Color Support: | Yes |
| Port Name(s): | 192.168.100.20 |
| Data Format: | RAW |
| Printer Location: | |
| Print Processor: | winprint |
| Comment: | |
| OS Environment: | Windows x64 |

## PRINT DRIVER PROPERTIES

| | |
|---|---|
| Driver Name: | KONICA MINOLTA PS Color Laser Class Driver |
| Driver Type: | Type 4 - User Mode |
| Driver Version: | 10.0.16299.15 |

## ADDITIONAL PRINT DRIVER FILES

C:\Windows\System32\DriverStore\FileRepository\pmkmdl2.inf_amd64_def415d1fe3a5c7a\kxcl2-manifest.xml
C:\Windows\System32\DriverStore\FileRepository\pmkmdl2.inf_amd64_def415d1fe3a5c7a\kxcl2_pipelineconfig.xml
C:\Windows\System32\DriverStore\FileRepository\ntprint.inf_amd64_e78b1c7872a58ad2\Amd64\PSCRIPT.NTF
C:\Windows\System32\DriverStore\FileRepository\ntprint.inf_amd64_e78b1c7872a58ad2\Amd64\PSCRIPTFE.NTF
C:\Windows\System32\DriverStore\FileRepository\ntprint.inf_amd64_911d0f1688bc7577\Amd64\V3HostingFilter.dll
C:\Windows\System32\DriverStore\FileRepository\ntprint.inf_amd64_911d0f1688bc7577\Amd64\V3HostingFilter_pipelineconfig.xml

User
[Company Name]
[Street Address]
[City ST ZIP Code]

[Pick the date]

**[Recipient Name]**
*[Title]*
[Street Address]
[City ST ZIP Code]

Dear [Recipient Name]

[As a long-time admirer of the outstanding work that your organization has done in the community, I particularly enjoyed having the opportunity to see how you function from the inside. As you indicated during our meeting, our neighborhood group has grown to a point where it needs to dramatically enhance its accounting function so that it can continue to serve effectively.

This correspondence outlines the complete scope of work you requested, including objectives, procedures, identification of responsibilities, and estimated fees.]

OBJECTIVE

[Implement the Moda-50 accounting system on the network. Install the Model 50 software, including implementation and setup, training, conversion assistance, and post-conversion support of the library master general ledger, accounts payable, and inventory master modules. Provide professional assistance related to this new system and coordinate the bridge to and from the Trey Research and Contoso, Ltd. software. Success of this project is dependent not only on the software, but also on your personnel's skill, effort, and willingness to work as a team.]

SCOPE OF SERVICES

1. Procedures:
   - A. [Assist in planning implementation of the Model 50 accounting system.
   - B. Recommend steps required to successfully install the new system and assist in assembling setup information and accounting data used in the implementation process.
   - C. Establish specifications for the bridge from the Trey Research software to capture cash receipt information. (Note: Trey Research software has a "general ledger distribution" file that contains information that can be bridged in detail or summary format. The interface [export file] will be written by Trey Research staff.]
   - D. Establish specifications for the bridge from the Contoso, Ltd. software to bridge payment schedules for grants issued. (Note: Contoso, Ltd. has a standard bridge but requires minor modification. The interface will be modified by Contoso, Ltd. staff.]
   - E. Write the bridge to receive [import] the information into the Model 50 software.]

2. Training and Testing

# HVAC Reaffirmation Call Script
## PRE AUTHORIZED PAYMENTS

**CSR** May I please speak with Mr /Mrs _____?
Hello, my name is _____ from OntarioEco Home Services, how are you doing today?
That s great to hear
I d like to verify the details of your new (equipment name)
**CSR** Our records indicate that you are the registered home owner. Is this correct? (If Geo results match applicant) or **(specify the relationship of the applicant to the registered home owner)**
And to confirm you signed the rental application provided by (agent s name) today **and he/she has left your home correct?**
**Want for the customer to provide a "yes" before proceeding**
*If YES – proceed* - To confirm your address is _____ Is this correct?
*If YES – proceed* And you are between the ages of 18-75? And your D O B is _____
*75 or older (PROCEED IF YOU ALREADY HAVE A CO-APPLICANT AGED 18 – 74 ON THE ALREADY SUBMITTED APPLICATION – AND READ THIS).* Mr./Mrs. _____ as per our "Internal Policy" as you are (specify age) we ask that you provide us with a co applicant aged 18 – 74 who may s gn the Rental Application as a witness prior to OntarioEco Home Services installing the (equipment name). Are you able to provide us with a co-applicant today? *If YES– proceed – and if co-applicant is to be provided after the TPV inform OntarioEco to have the co-applicant aged 18 – 74 sign the application prior to installation no need to do TPV with co-applicant. TPV is done with homeowner only* I d like to confirm that you agree you ll be renting your (equipment name) from OntarioEco Home Services at $_____ plus HST per month for a 120 month term during which you are fully covered for any service requirements with priority service 7 days a week, 24 hours a day
Mr /Mrs _____, did you understand that part?
*Wait for customer's response. If "Yes" proceed*
*If no response or "okay" "huh" please specify – Can I confirm that as a clear "Yes"?*
*If "Yes" proceed*
For your convenience the OntarioEco Home Services rental charges will be withdrawn from your chequing account on or as close as possible to the first of each month
Please ensure a copy of void cheque is left with either (agent's name) or with our installer during your installation.
Mr /Mrs _____, did you understand that part?
*Wait for customer's response. If "Yes" proceed.*
**Mr./Mrs._____, please bear with me while I read through the following statements. You have a right to a 10 days "cooling off period" during which you may cancel your agreement in writing. Your "Consumer's Rights" under the CPA are outlined in Section 18 of the terms and conditions of your _____ rental application**
**Thank you for your patience**
**Mr /Mrs. _____, when would you like the installation to take place? We have as early as _____** *(provide slot given to you by the sales agent or closest date/time e.g. Today between 1-3 pm)*
Ok you are all set. Should there be any updates about your installation our dispatch department will contact you directly- are there any other numbers we can add to your file? *(Add additional contact details to order after the call) After customer answers – proceed*
Before I let you go for quality assurance purposes how you would rate (agent's name) performance on the scale of 1-10?
It was a pleasure speaking with you Mr./Mrs _____
Enjoy your new (equipment name) and Thank You for Choosing OntarioEco Home Services.

Test for

Jerusalem

Pharmacy

# FAX

*Date:* 12/12/2 16 2:42:2 PM

*Pages:* 3

*Subject:* TESTING FAX OUTBOUND VIA INTELEPEER

*To:* Faxtoy net
*Organization:* ent Faxi g
*Fax Number:* -5593501239
*Phone Number:*

*From:* Adminis'ra
*Organization:*
*Fax Number:* 706 802 6767
*Phone Number:* 7 6502672
*Email:* etworkops@berry edu

*Comments:*
FAX NC OUTBOUND TEST NUMBER 5

Powered by myFAX from Optimum
FaxFinder

If you received this fax in error, or would like to opt-out, please call 706-238-5838 or fax 706-238-5624 or email

**EPIC**

YEAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA FAX TOY IN DA HOUSE MOFO

WE IIE S DOIN THE IT UP IN HERE IIII

This fax was sent with GFI FAXmaker fax server. For more information, visit: http://www.gfi.com

# Windows Printer Test Page

Congratulations!

If you can read this information, you have correctly installed your HP Officejet 4620 series on MARYKAY-PC

The information below describes your printer driver and port settings

```
Submitted Time:  2_34_42 PM 5/30/2014
Computer name:   MARYKAY-PC
Printer name:    HPF58540 (HP Officejet 4620 series)
Printer model:   HP Officejet 4620 series
Color support:   Yes
Port name(s):    WSD-ced1a9fe-6676-4b2f-8394-d3919d88a445_0036
Data format:     RAW
Share name:      HPF58540 (HP Officejet 4620 series)
Driver name:     UNIDRV.DLL
Data file:       hpaj_4620.gpd
Config file:     UNIDRVUI.DLL
Help file:       UNIDRV.HLP
Driver version:  6.00
Environment:     Windows x64
Monitor:         HP 6412 Status Monitor

Additional files used by this driver:
 C:\Windows\system32\spool\DRIVERS\x64\3\HPMACRONAMES.gpd
 C:\Windows\system32\spool\DRIVERS\x64\3\hpwp109.inn
 C:\Windows\system32\spool\DRIVERS\x64\3\hpwp1drv09.dll (09.84.00.1173)
 C:\Windows\system32\spool\DRIVERS\x64\3\hpwp1un09.dll  (09.84.00.1173)
 C:\Windows\system32\spool\DRIVERS\x64\3\hpfme51.dll    (0.3.07__MH_DDK_PATCH)
 C:\Windows\system32\spool\DRIVERS\x64\3\hpwp1res09.dll (09.84.00.1173)
 C:\Windows\system32\spool\DRIVERS\x64\3\copyright.txt
 C:\Windows\system32\spool\DRIVERS\x64\3\hpinksts6412LM.dll      (28.0.1175.0)
 C:\Windows\system32\spool\DRIVERS\x64\3\hpinksts6412.dll        (28.0.1175.0)
 C:\Windows\system32\spool\DRIVERS\x64\3\unires.dll      (6.1.7600.16385
(WinZ rem 090713.1255))
 C:\Windows\system32\spool\DRIVERS\x64\3\locale.gpd
 C:\Windows\system32\spool\DRIVERS\x64\3\stdnames.gpd
 C:\Windows\system32\spool\DRIVERS\x64\3\hpoj_4620_n.fmx

This is the end of the printer test page
```

| | |
|---|---|
| [Readiness to change]<br>[Dimension V:<br>[Pattern: Continued Use or Continued Problem Potential<br>[Dimension VI<br>[Recovery/living environment] | Text<br>Text<br>Text |

Counselor Signature

[redacted]

Date Signed
[redacted]/2017

Supervisor Signature

[redacted]

Date Signed
[redacted]/2017

[redacted]
Licens SAMHI Counselor

[redacted]
Licens SAMHI Counselor

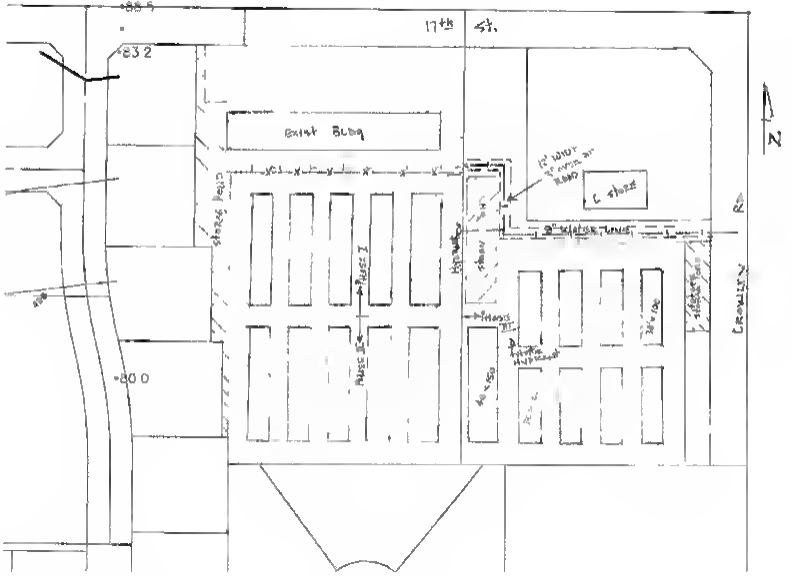
**Confidentiality statement**

Information contained on this facesheet and the documents accompanying it are protected by Federal confidentiality rules (42 CFR part 2). The Federal rules prohibit you from making any further disclosures of this information unless it is expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by 42 CFR part 2.

Test M2o

tasty

**Order Ink**
**On Jan.05-2010**
**From 123**
**Inkjets.com**
**($79.98)**
**Conf.# 2738433**


17th St.
832
Exist Bldg
Storage Bldg
Place 1
Place 2
Place 3
Place 4
Place 5
Place 6
Place 7
Place 8
Place 9
Place 10
Place 11
Place 12
Place 13
Place 14
Place 15
Place 16
Place 17
Place 18
Place 19
Place 20
Place

```
**********xxxxxxxxxxxxxxxx
xxx   TX Error Report   xxx
xxx4xxxxxxxxxxxxxxxxxxxxxx

Following job ended in error

Job Number              0004
Address                 9074147785
Name
Start Time              01/30 10 08 AM
Call Length             00 00
Sheets                  0
Result                  00        Stan
```

Thursday, May 26, 2016

| Reservation Confirmation |
| --- |
| BF2400D3-2787-263 |
| [illegible] 05/31/2013 12:00:00 GMT |
| [illegible] |

For: Bhola Bear-Hill Hotel & Suites
Fax: 1(855)-880-3239
Attn: Rajesh Patel
Subject: Reservation Confirmation

Dear Rajesh Patel,

[illegible]

[illegible]

| [illegible] | | | |
| --- | --- | --- | --- |
| Booked by: | Trudi Bear | Hotel: | Bear |
| Address: | Tech | Zip code: | Bear |
| City: | Bear | Country: | BEAR |
| Email address: | trudi2323@gmail.com | Frequency Number: | 328456785 |

| [illegible] | | | |
| --- | --- | --- | --- |
| Card Type: | Visa | Expiry Date: | 02/2016 |
| Card Number: | 4111111111111111 | Last Name on Card: | Bear |
| | | Grand Total: | $108.20 |

| [illegible] | | | |
| --- | --- | --- | --- |
| Number of Rooms: | 1 | Number of Night: | 1 |
| Check In: | May 30, 2013 | Check Out: | May 31, 2013 |

| [illegible] | | | | | |
| --- | --- | --- | --- | --- | --- |
| First Name: | Trudi | | Last Name: | Bear | |
| Room Type: | | Bed: | | May 30 | |
| | | Rate: | | $90.00 | |

Sub-Total: $90.00
Tax (17.00%): $15.30 + Fees ($5.00) = Total $108.20

Note: Room has no Extra Person(s) & Pets

**Cancellation Policy:**

[illegible]

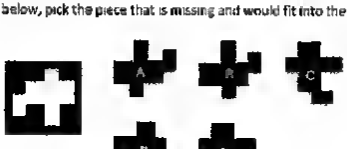
[illegible]

# June 11th – Occipital Lobe

The exercises today will require you to use visual interpretation and mental rotation.

1) The box on the left has been folded together from one of the four choices given. Which one?

2) From the choices below, pick the piece that is missing and would fit into the diagram on the left




Answers: #1 – D and #2 – C

Received Fax Confirmation

# Fax Coversheet

**To** fax functionality
**Company**
**Fax #** +1 (866) 677-1655
**Phone**

**From** Carol Wellander
**Pages** 1 including this cover
**Fax #** +1 (801) 225-2706
**Date** 8/25/2010

Message
this is a tet

MedPlans4U.com

801 225-4227 p
801 225-2706 f
carol@MedPlans4U.com
www.MedPlans4U.com

test fax

mellois auto

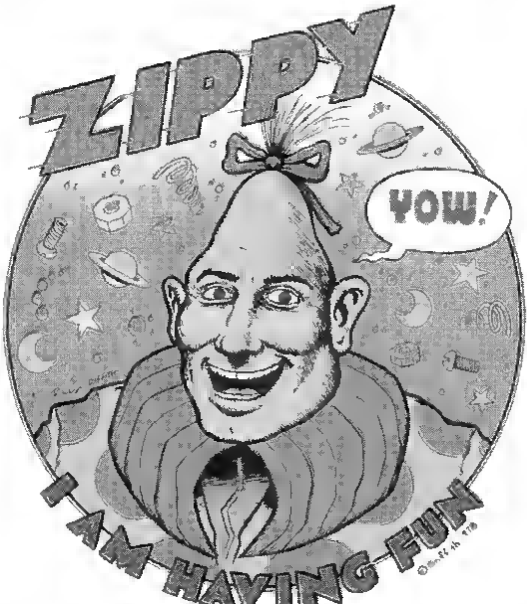
This is a test fax, please ignore

Hello World!

LG
Life's Good
NEW
MEGA Inverter
MEGA INVERTER
An Elegant and Economical Solution

**DUMMY FAX DOCUMENT**

**NO CONTENT HERE**

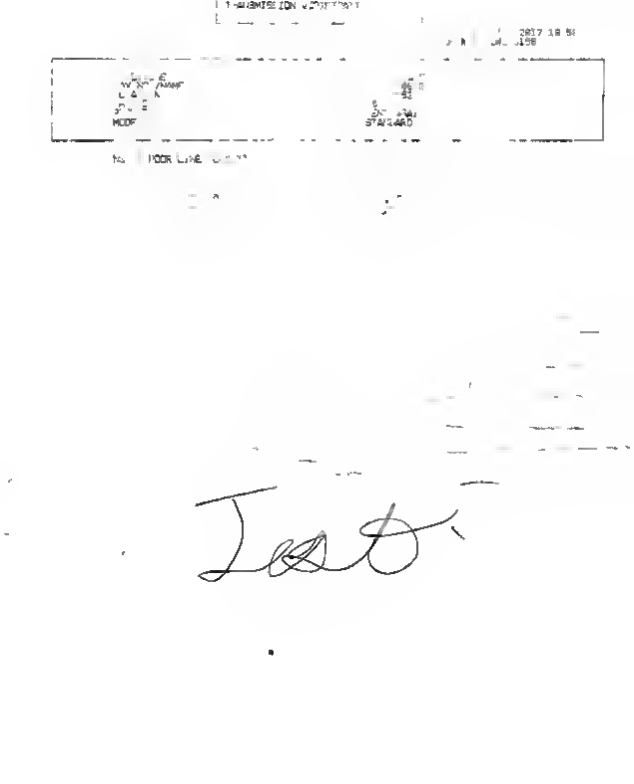

ZIPPY
YOW!
I AM HAVING FUN

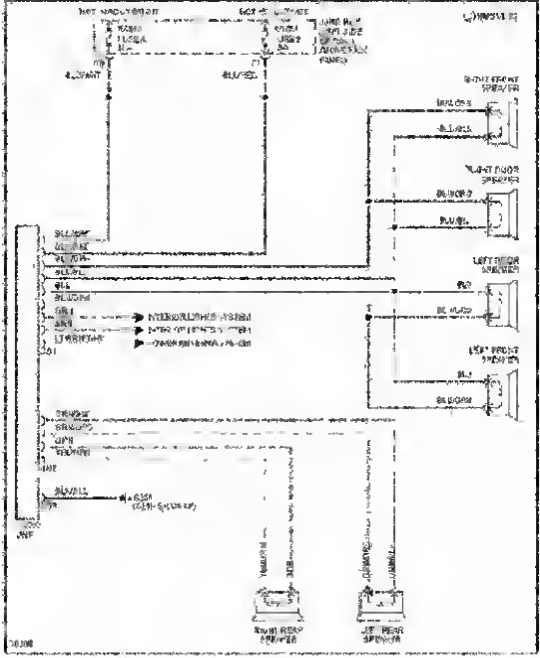
Fax: +1 888 8771655

TEST



This fax was sent with GFI FaxMaker fax server. For more information, visit: http://www.gfi.com





test text file

Page 1

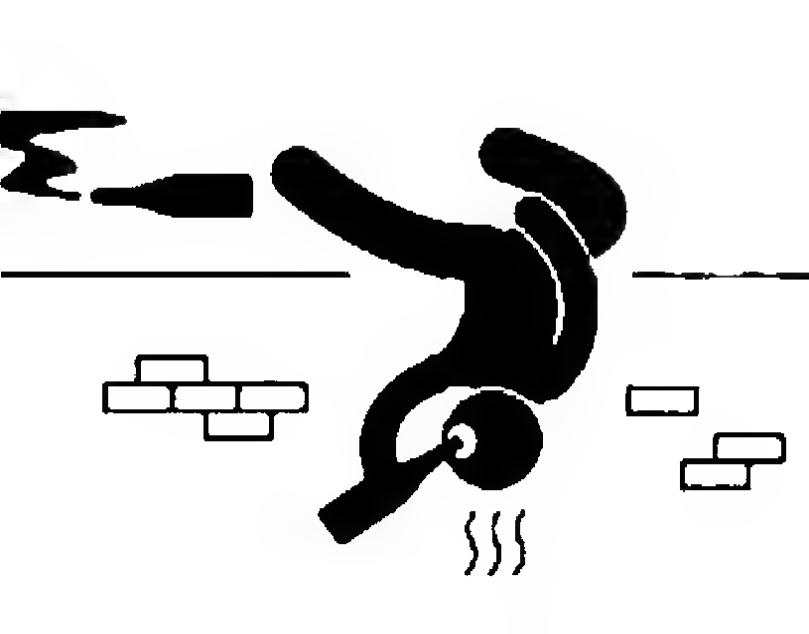


Fig. 23

Kashish

Fax test

Canon

K10376

# Setting Up the FAX

To use the fax features of the machine, you can enter the fax settings through the **Easy setup**.

## Using Easy setup

Press the **MENU** button, then select in the order of > **Device settings** > **FAX settings** > **Start Easy setup** or **Easy setup** > **OK** button or **Start setup**.

Use the ◀/▶/▲/▼ button to select the item, then press the **OK** button.

**Easy setup** starts up.
Follow the on-screen instruction to complete the settings in accordance with the operating environment.

## Complementary information about Fax Setting Using Easy setup

### Connect to a Telephone Jack

Connect the machine to a telephone jack with the supplied telephone line cable.

The connector is labeled on the back of the machine.

- A basic connection method is shown in this figure. For other connection methods, refer to the **On-screen Manual**.
- Users in Europe: If you prepare your own telephone line cable, be sure it is a 6-wire telephone line cable.

PVY
JOSEPH JONES
14208 DARMSTADT RD
EVANSVILLE, IN 47725-8556

January 19, 2016

Dear Joseph Jones:

Per your request, we have added the following AT&T account to your AT&T Access ID josephjonesmgeit.net:

Account Type: Home Phone/Internet
Last 4 Digits of Home Phone & Internet Number: 1604

Did you know? You can manage all your AT&T accounts using a single login. This includes other numbers on the account listed above, as well as other accounts with AT&T, such as Wireless or U-verse®. Just take a few moments to add them to your AT&T Access ID. Your AT&T Access ID is your User ID to log in to myAT&T.

Your privacy is important to us and we want to make sure you requested these changes. If these changes were not authorized, please contact us at att.com/contactus or call 1.800.288.2020 to talk with one of our customer service representatives.

Thank you,

AT&T Online Services
www.att.com

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1016 Post Consumer Waste. Printed on Recycled Paper

Pretty
Bora

# Principal Agency - Resident

Principal Agency - Life , Principal Agency - Variable Products

## CRESCENT WEALTH MANAGEMENT INC

3344 PEACHTREE RD NE
SUITE 1450
ATLANTA , GA 30326

**is authorized to transsct business as descnbed above**

License No 112739 Issue Date: 02-20-2015 Expiration Date 12-31-2016

Generated by Sircon 107974663

Georgia Department of Insurance

THIS IS TO CERTIFY THAT

CRESCENT WEALTH MANAGEMENT INC
3344 PEACHTREE RD NE SUITE 1450 ATLANTA GA 30326

LICENSE NUMBER 112739

IS HEREBY AUTHORIZED TO TRANSACT BUSINESS IN ACCORDANCE TO THE LICENSE DESCRIPTION SHOWN BELOW

**Principal Agency - Resident**
Principal Agency Life Principal Agency - Variable Products

Issue Date 02-20-2015 Expiration Date 12-31-2016

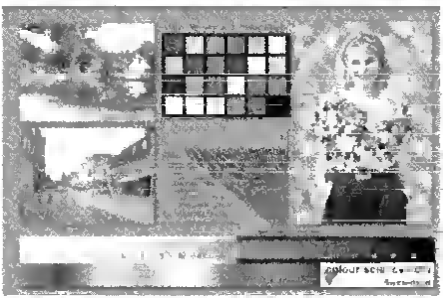
Generated by Sircon 107974663

# Fax Test

M3-05-EAST

3/17/14

LC /AM



TEST FAX FROM FINLAND!!!!!

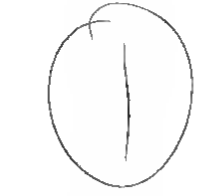
۶. الگوریتمی با مرتبه زمانی $O(n \log n)$ ارائه کنید که آرایه A شامل n عدد صحیح را بهمراه عدد X دریافت کرده و مشخص کند آیا اندیس‌های i و j ($i \neq j$) بطوریکه $A[i] + A[j] = X$ وجود دارد یا خیر

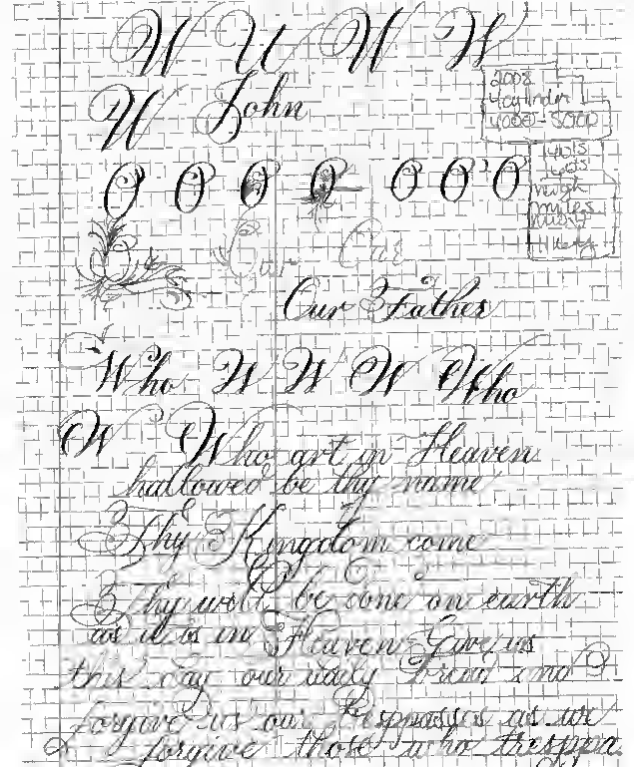
۷. الگوریتمی با مرتبه زمانی $O(n \log n)$ ارائه کنید که آرایه‌های A و B هر یک شامل n عدد صحیح را بهمراه عدد X دریافت کرده و مشخص کند آیا اندیس‌های i و j ($i \neq j$) بطوریکه $A[i] + B[j] = X$ وجود دارد یا خیر

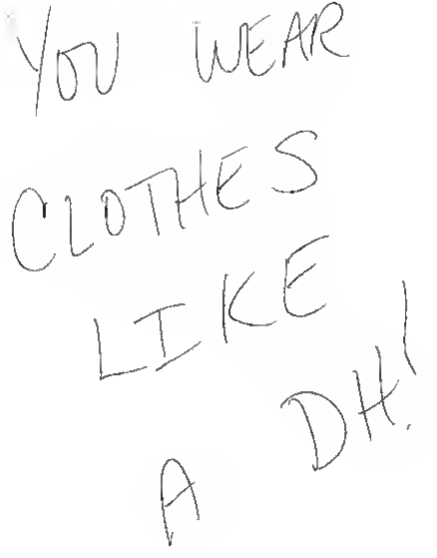
۸. با استفاده از روش تقسیم و حل الگوریتمی با مرتبه زمانی $O(\log n + \log k)$ ارائه کنید که ۲ آرایه n و k عنصری از اعداد صحیح را دریافت کرده و kامین بزرگترین عنصر موجود در اجتماع این دو آرایه را مشخص نماید

TEST

Testing




John
Our Father
Who
Who art in Heaven
hallowed be thy name
Thy Kingdom come
Thy will be done on earth
as it is in Heaven Give us
this day our daily
forgive us our
forgive those who trespass


YOU WEAR
CLOTHES
LIKE
A DH!

THIS IS A TEST!

TO

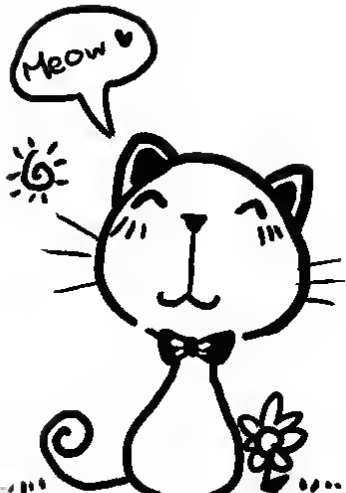
FROM

FAX #

FAX #

DATE

# OF PAGES

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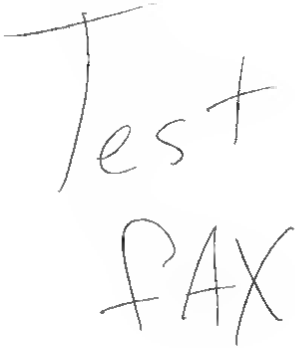
**********
*** ERROR TX REPORT ***
**********

INCOMPLETE TRANSMISSION

| | |
|---|---|
| TX/RX NO. | 0061 |
| DESTINATION NUMBER | 19726081147 |
| DESTINATION ID | |
| ST. TIME | 05/23 14:46 |
| COMMUNICATION TIME | 00'27 |
| PAGES SENT | 0 |
| RESULT | NG |




1 888 473 2963
1 855 330 1239

Free & Open Source

# ICTFAX

http://ictfax.org/

**Email to FAX**
**FAX to Email**
**Web to FAX**

TEST PAGE 1

**ICT Innovations**

This FAX was transmitted by Zoiper

Test fax test fax test fax test fax

SAVE 50¢
when you buy any Ensure Chocolate
Once Mas® 8 FL OZ. OR LARGER
AHORRE 50¢
al comprar cualquier sabor de Chocolate

# FAX

Date 09/09/16

Total number of pages 1

To 1-213-294-2943

Company

Department

Fax number 1-213-294-2943

From kearns

Subject Testing

Testing 123

Hey Mr.

Hey

# Canon

## Thank you for using Canon USA's Test Fax Service

We appreciate the opportunity to assist you with your Canon product.

For additional support, please visit us at:

**WWW.USA.CANON.COM/SUPPORT**

Here you can also access:

- User manuals, drivers & software files that can be downloaded directly to your computer
- Product specifications and troubleshooting help
- Our Dealer Returns Service

**Live technical support 1-800-OK-CANON (800-652-2666)**

Hours of operation:

PIXMA Printer Support
10:00am – 11:00 pm ET M-F
Closed Saturdays, Sundays and Major Holidays

imageCLASS and FAXPHONE Support
8:00am – 8:00pm ET M-F
Closed Saturdays, Sundays and Major Holidays

**MAXIFY Printer Support 1-844-4-MAXIFY (844-462-9439)**
8:00 am – 10:59 pm ET M-F
12:00 am – 7:00 pm Saturdays
Closed Sundays and Major Holidays

**Canon Store 1-800-OK-CANON (800-652-2666)**
8:00AM – 12:00AM ET 7 days a week, no holiday major holidays

**http://shop.usa.canon.com/**

The Canon Direct Store is a convenient way to purchase professional scanners, multifunction printers and facsimile machines, as well as supplies and accessories for all of these products!

From lens caps to battery packs, it's a fast and easy way to get the accessories and supplies you need for your Canon cameras, camcorder, copiers or projectors too. The Canon Direct Store is secure and reliable.

# Test Fax

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SMILE
JESUS LOVES YOU

TEST
ODESSA
TX

# TEST

FAX

Now Is The Time for all good men to come to the aid of their country.

*' Glorify your Lord by the praising of HIM before the rising of the sun and before its setting; and during hours of the night also glorify (HIM!) and during parts of the day.... " The Holy Quran 20:130*

# PERPETUAL SALAAT TIMINGS

*For Dallas / Ft. Worth Metroplex*

*Timings for Dallas / Ft. Worth Area ONLY; Areas in the vicinity may vary slightly*

## JANUARY

| D | Fajhr Rise | Sun-Aur | Zuhr/Asr | Sun-Set | Maghrib Isha |
|---|---|---|---|---|---|
| 1 | 6:21 | 7:31 | 12:32 | 5:33 | 5:43 |
| 5 | 6:22 | 7:32 | 12:34 | 5:36 | 5:46 |
| 10 | 6:22 | 7:32 | 12:36 | 5:40 | 5:50 |
| 15 | 6:21 | 7:31 | 12:39 | 5:45 | 5:55 |
| 20 | 6:20 | 7:30 | 12:41 | 5:50 | 6:00 |
| 25 | 6:08 | 7:28 | 12:42 | 5:55 | 6:09 |
| 30 | 6:05 | 7:25 | 12:42 | 5:00 | 6:10 |

## FEBRUARY

| D | Fajhr Rise | Sun-Aur | Zuhr/Asr | Sun-Set | Maghrib Isha |
|---|---|---|---|---|---|
| 1 | 6:03 | 7:23 | 12:43 | 6:01 | 6:11 |
| 5 | 6:00 | 7:20 | 12:42 | 6:04 | 6:14 |
| 10 | 5:56 | 7:17 | 12:43 | 6:08 | 6:15 |
| 15 | 5:51 | 7:12 | 12:42 | 6:15 | 6:23 |
| 20 | 5:46 | 7:07 | 12:42 | 6:17 | 6:27 |
| 25 | 5:39 | 7:01 | 12:41 | 6:22 | 6:32 |
| 30 | 5:58 | 6:56 | 12:41 | 6:34 | 6:34 |

## MARCH

| D | Fajhr Rise | Sun-Aur | Zuhr/Asr | Sun-Set | Maghrib Isha |
|---|---|---|---|---|---|
| 1 | 5:56 | 6:50 | 12:41 | 6:25 | 6:35 |
| 5 | 5:52 | 6:27 | 12:40 | 6:28 | 6:38 |
| 10 | 5:35 | 6:45 | 12:39 | 6:37 | 6:42 |
| 15 | 5:19 | 6:39 | 12:38 | 6:36 | 6:46 |
| 20 | 5:12 | 6:32 | 12:37 | 6:40 | 6:50 |
| 25 | 5:07 | 6:27 | 12:36 | 6:43 | 6:20 |
| 30 | 5:00 | 6:20 | 12:34 | 6:46 | 6:56 |

## APRIL

| D | Fajhr Rise | Sun-Aur | Zuhr/Asr | Sun-Set | Maghrib Isha |
|---|---|---|---|---|---|
| 1 | 5:56 | 7:17 | 1:33 | 7:04 | 7:58 * |
| 5 | 5:50 | 7:11 | 1:32 | 7:51 | 5:00 |
| 10 | 5:44 | 7:05 | 1:33 | 7:56 | 8:07 |
| 15 | 5:37 | 6:57 | 1:28 | 6:00 | 8:10 |
| 20 | 5:31 | 6:51 | 1:28 | 8:04 | 8:14 |
| 25 | 5:26 | 8:46 | 1:27 | 8:07 | 8:17 |
| 30 | 5:21 | 8:46 | 1:27 | 8:11 | 8:21 |

## MAY

| D | Fajhr Rise | Sun-Aur | Zuhr/Asr | Sun-Set | Maghrib Isha |
|---|---|---|---|---|---|
| 1 | 5:21 | 6:41 | 1:26 | 8:10 | 8:20 |
| 5 | 5:17 | 6:37 | 1:28 | 8:13 | 8:23 |
| 10 | 5:13 | 6:33 | 1:25 | 8:16 | 6:28 |
| 15 | 5:09 | 6:29 | 1:25 | 8:20 | 6:20 |
| 20 | 5:06 | 6:20 | 1:24 | 6:28 | 8:34 |
| 25 | 5:03 | 6:23 | 1:24 | 8:27 | 8:37 |
| 30 | 5:01 | 6:21 | 1:28 | 8:30 | 5:46 |

## JUNE

| D | Fajhr Rise | Sun-Aur | Zuhr/Asr | Sun-Set | Maghrib Isha |
|---|---|---|---|---|---|
| 1 | 5:01 | 6:21 | 1:27 | 8:31 | 8:41 |
| 5 | 5:00 | 6:20 | 1:27 | 8:33 | 8:43 |
| 10 | 4:58 | 6:19 | 1:28 | 8:36 | 8:48 |
| 15 | 4:58 | 6:19 | 1:28 | 6:38 | 8:48 |
| 20 | 5:00 | 6:20 | 1:30 | 5:39 | 8:49 |
| 25 | 5:02 | 6:23 | 1:31 | 8:40 | 8:50 |
| 30 | 5:03 | 6:23 | 1:33 | 8:42 | 8:52 |

## JULY

| D | Fajhr Rise | Sun-Aur | Zuhr/Asr | Sun-Set | Maghrib Isha |
|---|---|---|---|---|---|
| 1 | 5:02 | 6:22 | 1:26 | 8:40 | 8:50 |
| 5 | 5:03 | 6:25 | 1:28 | 8:46 | 8:50 |
| 10 | 5:07 | 6:27 | 1:26 | 8:39 | 8:49 |
| 15 | 5:10 | 6:30 | 1:26 | 6:27 | 8:47 |
| 20 | 5:13 | 6:33 | 1:30 | 8:35 | 8:45 |
| 25 | 5:17 | 6:37 | 1:30 | 8:33 | 8:45 |
| 30 | 5:20 | 8:40 | 1:30 | 6:29 | 6:20 |

## AUGUST

| D | Fajhr Rise | Sun-Aur | Zuhr/Asr | Sun-Set | Maghrib Isha |
|---|---|---|---|---|---|
| 1 | 5:21 | 6:41 | 1:33 | 8:27 | 8:37 |
| 5 | 5:24 | 6:44 | 1:34 | 8:23 | 6:33 |
| 10 | 5:27 | 6:47 | 1:34 | 8:19 | 6:29 |
| 15 | 7:21 | 6:51 | 1:33 | 8:14 | 8:24 |
| 20 | 5:24 | 6:54 | 1:31 | 8:08 | 8:18 |
| 25 | 5:36 | 6:58 | 1:30 | 6:02 | 8:12 |
| 30 | 5:41 | 7:04 | 1:29 | 7:54 | 6:05 |

## SEPTEMBER

| D | Fajhr Rise | Sun-Aur | Zuhr/Asr | Sun-Set | Maghrib Isha |
|---|---|---|---|---|---|
| 1 | 5:41 | 7:02 | 1:28 | 7:53 | 8:04 |
| 5 | 5:44 | 7:02 | 1:27 | 7:48 | 7:58 |
| 10 | 5:47 | 7:04 | 1:25 | 7:41 | 7:51 |
| 15 | 5:50 | 7:11 | 1:24 | 7:35 | 7:45 |
| 20 | 5:54 | 7:15 | 1:22 | 7:28 | 7:38 |
| 25 | 5:57 | 7:18 | 1:20 | 7:21 | 7:31 |
| 30 | 6:00 | 7:21 | 1:19 | 7:14 | 7:24 |

## OCTOBER

| D | Fajhr Rise | Sun-Aur | Zuhr/Asr | Sun-Set | Maghrib Isha |
|---|---|---|---|---|---|
| 1 | 6:02 | 7:22 | 1:18 | 7:13 | 7:23 |
| 5 | 6:05 | 7:25 | 1:17 | 7:06 | 7:16 |
| 10 | 6:08 | 7:28 | 1:16 | 7:01 | 7:11 |
| 15 | 6:12 | 7:32 | 1:15 | 6:56 | 7:06 |
| 20 | 6:17 | 7:37 | 1:15 | 6:48 | 6:58 |
| 25 | 5:21 | 6:41 | 12:15 | 5:43 | 5:53 * |
| 31 | 5:25 | 6:45 | 12:12 | 6:38 | 5:48 |

## NOVEMBER

| D | Fajhr Rise | Sun-Aur | Zuhr/Asr | Sun-Set | Maghrib Isha |
|---|---|---|---|---|---|
| 1 | 5:28 | 6:46 | 12:13 | 5:37 | 5:47 |
| 5 | 5:29 | 6:49 | 12:13 | 5:34 | 5:44 |
| 10 | 5:34 | 6:54 | 12:14 | 5:30 | 5:40 |
| 15 | 5:38 | 6:58 | 12:14 | 5:27 | 5:37 |
| 20 | 5:43 | 7:04 | 12:15 | 5:24 | 5:34 |
| 25 | 5:47 | 7:08 | 12:18 | 5:23 | 5:33 |
| 30 | 5:52 | 7:13 | 12:18 | 5:22 | 5:32 |

## DECEMBER

| D | Fajhr Rise | Sun-Aur | Zuhr/Asr | Sun-Set | Maghrib Isha |
|---|---|---|---|---|---|
| 1 | 5:52 | 7:13 | 12:18 | 5:22 | 5:32 |
| 5 | 5:55 | 7:18 | 12:19 | 5:21 | 5:31 |
| 10 | 6:00 | 7:20 | 12:22 | 5:22 | 5:32 |
| 15 | 6:02 | 7:23 | 12:24 | 5:23 | 5:33 |
| 20 | 6:00 | 7:26 | 12:26 | 5:25 | 5:35 |
| 25 | 6:09 | 7:28 | 12:29 | 5:27 | 5:37 |
| 30 | 6:10 | 7:30 | 12:31 | 5:31 | 5:41 |

Note:

* First Sunday in April Time Change - Move Forward one hour in Spring
* Last Sunday in October Time Change Move Backward one hour in Fall


# Islamic Center of Momin

1919 Perry St., Irving, TX 75061; P.O.Box 140763 Irving TX. 75014-0763 Phone:214 - 554-0000

# Emergency Response Procedures

Facility #: 20-9831

FACILITY: must be kept on the premises at all times

Name: BROADWAY MART

Street Address: 227 SOUTH BROADWAY

City: AURORA County: KANE

A. Emergency contacts and information for a leak, spill, release or when alarm occurs

Contact A B operator at phone number: For releases over 25 gallons contact the dept. of emergency ser 630-256-4000 Contact REMA at 1-800-782-7860 Contact environmental contractor for remedial work at phone number 847-468-4000

B. Procedures for overfill protection during delivery of regulated substances

USTs are equipped with overfill prevention that is ANTI-REFILL ORIFICE PE

Fuel delivery driver will gauge UST's before beginning the unloading

Fuel delivery driver will stay with the UST during the delivery proce

START

C. Operation of emergency shut off systems.

Each UST system is equipped with an emergency shut off switch located AT BUILDING

Fuel shut off valve for supply and dispenser for each UST system

D. Appropriate responses to all alarms

Determine the source of an alarm and take appropriate action. Contact MD operator at phone number 847-468-4000

If a release is found shut down affected UST system and spill line

For releases over 25 gallons contact fire dept. at phone number 630-256-4000

Contact REMA at 1-800-782-7860 Contact environmental contractor for remedial work at phone number 847-468-4000

E. Reporting of leaks, spills and releases

Same as section A

F. Site-specific emergency procedures, if any:

CONTACT MD TANK AT 847-468-4000

## INDUCTION COOKTOP CHILI MACARONI (Revised)

### INGREDIENTS:

1 lb. ground beef
1 onion, chopped
3/4 c. green pepper, chopped
1 (16 oz.) can tomatoes, cut up or diced with liquid
1 (15 oz.) can kidney beans, undrained (optional)
1 (8 oz.) can tomato sauce
1/2 c. water
2 tsp. chili powder or more, to taste
1/4 teaspoon cumin (optional)
dash of dried red pepper flakes for heat.(optional)
1 1/4 tsp. salt, or less, to taste
1 bay leaf
1 c. uncooked small elbow macaroni, or pasta of your choice. Add 1/2 cup more if beans are omitted.

### DIRECTIONS:

In skillet using INDUCTION COOKTOP, set temperature to 350 degrees. Saute meat, onions and green pepper until meat is browned and vegetables are tender. Drain off fat. Stir in tomatoes, kidney beans, tomato sauce, water, chili powder, salt and bay leaf. Bring to boiling. Add macaroni; adjust ingredients to taste. Cover, and reduce heat temperature to 220 degrees. Simmer, stirring frequently until macaroni is cooked, 15 to 18 minutes. Remove the bay leaf before serving. Makes 6 servings. Sprinkle with grated Parmesan, and / or, Cheddar cheese.

Hi
World

K D V A

GOLDEN STATE
WARRIORS

Fiber Network Solutions, LLC
dba Optum Fiber Network Solutions
175 Paisley Lane
Tampa, FL 33619

P O Box 31846
Tampa, FL 33631

SomniCare INSTITUTO DEL SUEÑO

**FOR YOUR INFORMATION**

| | |
|---|---|
| To: | FaxToy |
| Fax number | +1 (888) 8771655 |
| From: | Stronghold |
| Fax number | (787) 754-4966 |
| Business phone | (787) 754-0330 |
| Date & Time | 8/24/2011 2:21:20 PM |
| Pages sent: | 1 |
| Re | Test Fax |


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Note:

**DUMMY FAX DOCUMENT**

**NO CONTENT HERE**

# Windows Printer Test Page

Congratulations!

If you can read this information, you have correctly installed your Xerox WorkCentre 7835 PCL6 on MAINOFFICE.

The information below describes your printer driver and port settings.

| | |
|---|---|
| Submitted@ Time | 9:18:27 AM 7/21/2014 |
| Computer Name | MAINOFFICE |
| Printer name | XRX9C034E54F9C9 PCL6 |
| Printer model | Xerox WorkCentre 7835 PCL6 |
| Color support | Yes |
| Port name(s) | X_192_168_1_108 |
| Data format | RAW |
| Share name | XRX9C034E54F9C9 PCL6 |
| Driver name | UNIDRV DLL |
| Data file | xQSPYXN6.gpd |
| Config file | UNIDRVUI DLL |
| Help file | UNIDRV HLP |
| Driver version | 6.00 |
| Environment | Windows x64 |

Additional files used by this driver:

```
C:\Windows\system32\spool\DRIVERS\x64\3\xQSPYXN6.inf
C:\Windows\system32\spool\DRIVERS\x64\3\xQSPYXN6.cfg
C:\Windows\system32\spool\DRIVERS\x64\3\x2upmG.dll          (5295, 1800, 0, 0)
C:\Windows\system32\spool\DRIVERS\x64\3\x2rmc1N6.dll        (5295, 1800, 0, 0)
C:\Windows\system32\spool\DRIVERS\x64\3\x2vFtUN6.dll        (5295, 1800, 0, 0)
C:\Windows\system32\spool\DRIVERS\x64\3\x2gunN6.dll         (5295, 1800, 0, 0)
C:\Windows\system32\spool\DRIVERS\x64\3\x2cuncN6.dll        (5295, 1800, 0, 0)
C:\Windows\system32\spool\DRIVERS\x64\3\x2ui7N6.dll         (5295, 1800, 0, 0)
C:\Windows\system32\spool\DRIVERS\x64\3\x2rmwUN6.dll        (5295, 1800, 0, 0)
C:\Windows\system32\spool\DRIVERS\x64\3\x2cmSN6.dll         (5295, 1800, 0, 0)
C:\Windows\system32\spool\DRIVERS\x64\3\x2jehUN6.exe        (5295, 1800, 0, 0)
C:\Windows\system32\spool\DRIVERS\x64\3\x2pTpcN6.dll        (5295, 1800, 0, 0)
C:\Windows\system32\spool\DRIVERS\x64\3\x2fpuhN6.dll        (5295, 1800, 0, 0)
C:\Windows\system32\spool\DRIVERS\x64\3\x2txmN6.cab
C:\Windows\system32\spool\DRIVERS\x64\3\xQSPYXN6.cab
C:\Windows\system32\spool\DRIVERS\x64\3\x2fpUN6.exe        (5295, 1800, 0, 0)
C:\Windows\system32\spool\DRIVERS\x64\3\x2thexy.dll
C:\Windows\system32\spool\DRIVERS\x64\3\x2fpW09.dll        (5295, 1800, 0, 0)
C:\Windows\system32\spool\DRIVERS\x64\3\UNIRES.DLL         (6.1.7600.16385
(w n7_rtm.090713-1255))
C:\Windows\system32\spool\DRIVERS\x64\3\STDNAMES.GPD
C:\Windows\system32\spool\DRIVERS\x64\3\STDFTYPE.GDL
C:\Windows\system32\spool\DRIVERS\x64\3\STDSCHEM.GDL
C:\Windows\system32\spool\DRIVERS\x64\3\STDSCHMX.GDL
C:\Windows\system32\spool\DRIVERS\x64\3\TTFSUB.GPD
C:\Windows\system32\spool\NRTVCWS\x64\3\LOCALE.GPD
C:\Windows\system32\spool\DRIVERS\x64\3\PCLXL.DLL          (6.0.5479.0
(vista_rtm_02_drivers_060801_2007))
C:\Windows\system32\spool\NRTVCWS\x64\3\PCLXL.GPD
C:\Windows\system32\spool\DRIVERS\x64\3\PRINT.GPD
C:\Windows\system32\spool\DRIVERS\x64\3\PJL.GPD
C:\Windows\system32\spool\DRIVERS\x64\3\PRESS.GPD
C:\Windows\system32\spool\DRIVERS\x64\3\PCLSERES.DLL       (6.0.5479.0
```

# Fax Cover Sheet

**To:** _____

**Fax Number:** 888 877-1655

**Company:** _____

**From:** Heather Lantz

**Re:** _____

**Today's Date:** 2012/04/02 19:48:50

**# of pages to follow this sheet:** 1

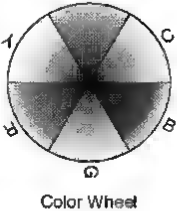
**Comments:** test

Test
Page

I would l ... [illegible] ... 2/SMC
Call on my Ag... and Hailey Tait manufactured by
SMG Machinery

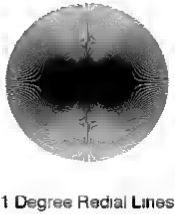
SMG Machinery Systems LLC will work to buy your used packaging machinery and process equipment

# Printer Test Page




Color Wheel

Gray Ramp



1 Degree Radial Lines

## Imageable Area

Page Size: 8.5x11.0in
215.9x279.4mm

Lower Left: 0.0x0.0in
0.0x0.0mm

Upper Right: 8.5x11.0in
215.9x279.4mm

Resolution: 600x600dpi
23562x23562dpm

## Interpreter Information

PostScript Level 3

Version: 3011.104 (0)

Product: PSNormalizer framework

Serial #: 0

UNIX Printing System

# Printed Using CUPS v1.3.x

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Need help? Contact your operating system vendor or visit "http://www.cups.org"

# MODIFICATION

Thursday May 28, 2015

| Modify Reservation Confirmation |
| --- |
| AE0FD84A-2788-2B8 |
| Updated 05/27/2015 12:09:06 GMT |

Dear Test Test,

Your reservation has been modified. Please review the following information and let us know if you have any questions regarding your reservation. Thank you for choosing Hertz.

Hertz #1 Ultimate Rent A Car
1 Test Rd
Test, Test 12345
(555) 555-5555

Thank you for choosing Hertz. We have received your credit card information and have successfully processed your reservation.

| | | | |
| --- | --- | --- | --- |
| Customer | Test Test | Member | 0004 |
| Address | Test | Status | Gold |
| City | Test | Country | USA |
| Email Address | test123123123@gmail.com | Telephone Number | 1234567890 |

| Rental Car Information | | | |
| --- | --- | --- | --- |
| Rental Car | Visa | Expiration Date | 08/2017 |
| Rental Number | XXXX-XXXX-XXXX-1111 | Car Service | 3448 |
| | | Grand Total | $0.00 |

| Reservation Details | | | |
| --- | --- | --- | --- |
| Number of Days | 1 | Number of Rentals | 1 |
| Check Out | May 27 2015 | Check In | May 28 2015 |

| Renter Information | | | |
| --- | --- | --- | --- |
| First Name | Test | Last Name | Test |
| Phone Number | Date | May 27 | |
| | Rate | $0.00 | |

Sub-Total: $0.00
Tax (17.000%): $0.00 – Base: $0.00 – Total: $0.00

Base Rate Information Not Found in Database

Cancellation Policy:
Lorem ipsum dolor sit amet, consectetur adipisicing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua. Ut enim ad minim veniam, quis nostrud exercitation ullamco laboris nisi ut aliquip ex ea commodo consequat. Duis aute irure dolor in reprehenderit in voluptate velit esse cillum dolore eu fugiat nulla pariatur. Excepteur sint occaecat cupidatat non proident, sunt in culpa qui officia deserunt mollit anim id est laborum.

Thanks for selecting Hertz to serve you today.

This is a test #f the amercan broadcast system

This is only a test

TEST

ON

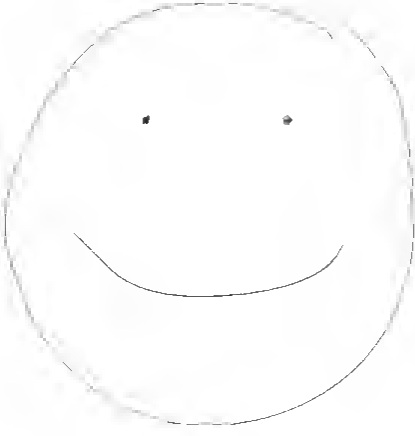
Postage Required Post Office will not deliver without proper postage

**U.S. STAMP & SIGN**
NEWON PRODUCT REGISTRATION DEPARTMENT
1480 GOULD DRIVE
COOKEVILLE, TN 38506-4197

**********
*** ERROR TX REPORT ***
**********

INCOMPLETE TRANSMISSION

| | |
|---|---|
| TX/RX NO. | 0030 |
| DESTINATION NUMBER | =0132001800 |
| DESTINATION ID | |
| ST. TIME | 07/08 00:38 |
| COMMUNICATION TIME | 00'37 |
| PAGES SENT | 0 |
| RESULT | NG |



TESTING LEGAL SIZE PAPER...

# WISUPDecode 3 1 0 (20-Aug-2002)

WISUPDecode is a graphical Java decoder for the SS7 ISUP protocol under GPL license
It dynamically loads a decoder for processing a message and so can support several ISUP variants Currently 3 decoders has been written and are not distributed with WISUPDecode:
- ETSI 300 356 1
- ANSI T1 113 1995
- BELLCORE GR CORE-317 (1994 issue) and GR-CORE-394 (1994 issue)

Currently there is no help for WISUPDecode so you will find here enough (I hope) for using it

Table of Contents


1 Files
2 WISUPDecode
3 Configuration files
4 Decoders
5 Languages
6 Applets
7 Compiling
8 Authors
9 Bugs comments, problems
10 Contacts

HP OfficeJet 6500 E710n All-in-One series

Fax Test Report for
Junkin
315 3[illegible]
Apr 21 20[illegible] 12:04PM

| Fax Hardware Test | PASS |
|---|---|
| Fax Connected to Active Telephone Wall Jack | PASS |
| Phone Cord Connected to Correct Port on Fax | PASS |
| Using Correct Type of Phone Cord with Fax | PASS |
| Dial Tone Detection | PASS |
| Fax Line Condition Test | PASS |

**Your HP device has passed the fax test.**

Fax settings can also affect the performance of your HP device.

Please review your current fax settings listed below.

| | |
|---|---|
| Language | English |
| Country/Region | USA |
| Auto Answer | On |
| Rings to Answer | 6 |
| Fax Reduction | Letter |
| Time and Date Owning | Time/Date Stamp |
| Fax Sound Volume | Soft |
| Distinctive Ring | Double & Triple |
| Busy Redial | Retry |
| No Answer Redial | No Redial |
| Automatic Reduction | On |
| Backup Fax Reception | On |
| [illegible] Error Correction Mode | On |
| Fax Speed | Fast (V.34/33600) |
| Fax Forwarding | Off |

Refer to your User Guide for more information on the fax test and settings.

Instructions on how to use this test:

Step 1: Press the "OK" button

Step 2: Choose the "Run Fax Test" item

Step 3: Choose the "Run Fax Test" item

MY0AM22[illegible]

[illegible]

[illegible]

[illegible]

**Janitorial Service** (five month of service)

**Carpet Cleaning** (15% off)

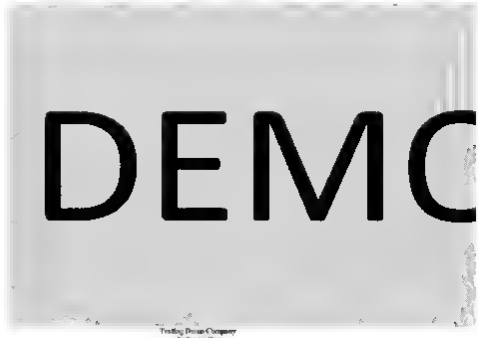
**Floor Service** (15% off)

**Janitorial Supplies** (40% off of our retail price here)

| | | |
|---|---|---|
| Toilet Bowl Cleaner | Total [illegible] per case | $26.45 |
| Bounce-wave Multi-Fold Towels | 250 towels per pack, 4000 per case | $16.90 |
| Toilet Tissue Premium | 4000 feet, 96 rolls per case | $36.99 |
| Clear Glass Cleaner | 1800 per case | $18.25 |
| Clear Glass 40% off | 370 per case | $62.20 |
| Bounce Roll Towels | 800 per case | $27.99 |
| Pink Hand Soap | 4 gallons per case | $15.45 |

[illegible]

[illegible]




Sterling Rental Company
[illegible]
Tel office: [illegible] Fax: [illegible]
[illegible]

Date: 1 /17/2017
Address: NO
Fax Number: 859) 530-1739

Mr. Megan M Cashen

Dear Kathryn Hallory:

This letter is to inform you that, effective 5/17/2017 Megan M Cashen will be assigned the following Level of Low Shock Terrain Residential. Previously the equipment class is under Out Patient def" 2 Level of Care

If you require any additional information, please feel free to contact me at emmanuelle.swenson@[illegible]3 or by phone at (866) 733-8836 Ext 12345

Respectfully

Isobel M Quigley, MA
NARNIA Website

Cyril Kyan CARE LEADER, LPN
Clinical Supervisor

+1 503 - 200 - 1300

| title | Phone Nr. | Fax | Address | Remark | Fax# |
|---|---|---|---|---|---|
| [illegible] | [illegible] 638581 | FAX, Reception | [illegible] | [illegible] | [illegible] |
| [illegible] | [illegible] | FAX [illegible] | [illegible] | [illegible] | [illegible] |
| [illegible] | [illegible] 553 [illegible] | FAX [illegible] | [illegible] | [illegible] | 1 |
| [illegible] | [illegible] | FAX [illegible] | [illegible] | [illegible] | [illegible] |
| [illegible] | [illegible] | [illegible] AT&T | [illegible] | [illegible] | [illegible] |
| [illegible] | [illegible] 358 [illegible] | FAX, [illegible] | [illegible] | [illegible] | 2 |
| [illegible] | [illegible] 6198 | FAX, AT&T | [illegible] | [illegible] | 1 |
| [illegible] | [illegible] 6885 | FAX, [illegible] | [illegible] | [illegible] | [illegible] |
| [illegible] | [illegible] 6931 | FAX, T [illegible] | [illegible] | [illegible] | 0 |
| [illegible] | [illegible] | FAX, Lasercheck [illegible] | [illegible] | [illegible] | [illegible] |
| [illegible] | [illegible] | FAX,

# QuickBooks

## Live Local Instructor-Led Training

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How to get the most out of your QuickBooks

---

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**Cost:** $429 for both days or $239 for one day

---

**Testimonials**

*"This QuickBooks course was everything I had envisioned it would be. Great teacher, very informative and easy to understand. I would recommend anyone from beginner to expert, to take this course. It is well worth the money." Jodi Lafayette, LA*

---

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# Amendment VI

In all criminal prosecutions the accused shall enjoy the right to a speedy and public trial, by an impartial jury of the State and district wherein the crime shall have been committed, which district shall have been previously ascertained by law, and to be informed of the nature and cause of the accusation; to be confronted with the witnesses against him; to have compulsory process for obtaining witnesses in his favor, and to have the Assistance of Counsel for his defence.

# Amendment VII

In suits at common law where the value in controversy shall exceed twenty dollars, the right of trial by jury shall be preserved, and no fact tried by a jury shall be otherwise reexamined in any Court of the United States than according to the rules of the common law.

# Amendment VIII

Excessive bail shall not be required, nor excessive fines imposed, nor cruel and unusual punishments inflicted.

# Amendment IX

The enumeration in the Constitution, of certain rights, shall not be construed to deny or disparage others retained by the people.

# Amendment X

The powers not delegated to the United States by the Constitution, nor prohibited by it to the States, are reserved to the States respectively, or to the people.

## AMENDMENTS 11 27

# Amendment XI

Passed by Congress March 4, 1794. Ratified February 7, 1795.

*[Note: A portion of Article III, Section 2 of the Constitution was modified by the 11th Amendment.]*

The Judicial power of the United States shall not be construed to extend to any suit in law or equity, commenced or prosecuted against one of the United States by Citizens of another State, or by Citizens or Subjects of any Foreign State.

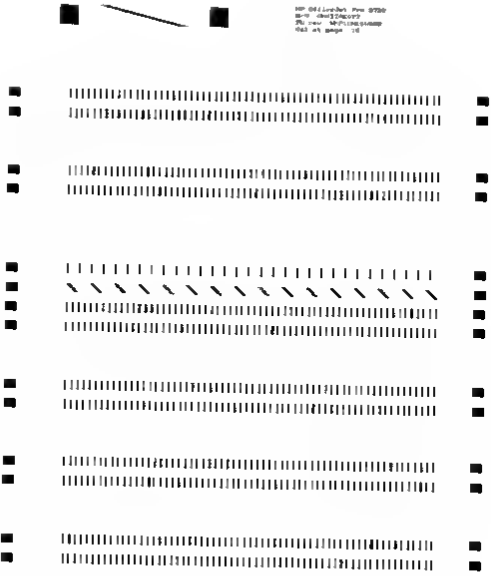
# Amendment XII

Passed by Congress December 9, 1803. Ratified June 15, 1804.

*[Note: A portion of Article II, Section 1 of the Constitution was changed by the 12th Amendment.]*

The Electors shall meet in their respective states, and vote by ballot for President and Vice-President, one of whom, at least, shall not be an inhabitant of the same state with themselves; they shall name in their ballots the person voted for as President, and in distinct ballots the person voted for as Vice-President, and they shall make distinct lists of all persons voted for as President, and of all persons voted for as Vice-President, and of the number of votes for each, which lists they shall sign and certify, and transmit, sealed, to the seat of the government of the United States, directed to the President of the Senate; the President of the Senate shall, in the presence of the Senate and House of Representatives, open all the certificates, and the votes shall then be counted;- The person having the greatest number of votes for President, shall be the President, if such number be a majority of the whole number of Electors appointed; and if no person have such majority, then from the persons having the highest numbers not exceeding three on the list of those voted for as President, the House of Representatives shall choose immediately, by ballot, the President. But in choosing the President, the votes shall be taken by states, the representation from each state having one vote; a quorum for this purpose shall consist of a member or members from two-thirds of the states, and a majority of all the states shall be necessary to a choice. [And if the House of Representatives shall not choose a President whenever the right of choice shall devolve upon them, before the fourth day of March next following, then the Vice President shall act as President, as in case of the death or other constitutional disability of the President.]* The person having the greatest number of votes as Vice-President, shall be the Vice-President, if such number be a majority of the whole number of Electors appointed, and if no person have a majority, then from the two highest numbers on the list, the Senate shall choose the Vice-President; a quorum for the purpose shall consist of two-thirds of the whole number of Senators, and a majority of the whole number shall be necessary to a choice. But no person constitutionally ineligible to the office of President shall be eligible to that of Vice-President of the United States.

*Superseded by Section 3 of the 20th Amendment.



C&S Commco, Inc. 4626 Gilmer Road, Longview Texas 75604

SAMSUNG
Prestige Dealer

903-759-2224 Longview, Texas
903-595-0699 Tyler, Texas

# FAX TRANSMISSION

**DATE:** October 10, 2017
**NO. OF PAGES** (including cover): 1

**TO:** Pittsburg Vet Clinic
**ATTN:** Jackie C.
**FAX NO:** (903) 856-7485
**PHONE:** (903) 856-6518
**FROM:** *Aaron Sulton*
**FAX NO:** (903) 759-2271
**TELEPHONE:** (903) 759-2224
**MOBILE:** *(903) 746-6607*

**RE.** Text Fax

Dr. Anantí Agosto Mújica, MD
Allergy Asthma and Immunology

Dra. Marietta Agosto Mújica, MD
Endocrinology Diabetes and Metabolism

# FAX COVER SHEET

8888771655

11/06/2013

Please help me!

Esta Transacción Incluye Información Confidencial de Salud

La información transmitida es para el uso exclusivo de la persona o entidad a la que va dirigida. Incluye información de salud que es personal y sensitiva. Esta información es de carácter privilegiado y confidencial. No está transmitida bajo el interés creado de salvaguardar del público o bajo circunstancias que no requieran su intervención. La persona a quien va dirigida la información tiene la obligación de mantenerla segura, protegida y confidencial. El divulgar esta información a terceras sin autorización adicional del paciente o de alguien a la que permita la ley será evidencia prohibida. El incurrir puede traer serias consecuencias penalizadas severas de tipo civil y/o criminal bajo las leyes federales y estatales. Si la persona que recibe esta información no es la persona a la que está dirigida la misma o el empleado o agente responsable de hacer llegar la misma a esa persona, se le notifica y advierte que cualquier divulgación, diseminación, distribución o fotocopia de la misma está total y estrictamente prohibida, tanto por la ley federal como la estatal. El salud la paciente este información por error favor de notificarnos y destruir la misma a este puesto posible.

Torre Médica Domingo Torres Zayas, Suite 8 308 Hospital General Menonita Cayey, Puerto Rico 00736
Tel 787 535-4374, 787 535 1001 ext. 1741 Fax. 787 535-1139
Calle San Jorge 263 Oficina 2 B Santurce Puerto Rico 00912

HP Officejet Pro 8600 N911a Series

Fax Log for

00-00-00 00:00AM

Last Transaction

| Date | Time | Type | Station ID | Duration | Pages | Result |
|---|---|---|---|---|---|---|
| | | | | Digital Fax | | |
| 00 00 | 00:00AM | Fax Sent | 18888771e55 | 1.43<br>N/A | 1 | Error 340* |

* A communication error occurred during the fax transmission. If you're sending, try again and/or call to make sure the recipient's fax machine is ready to receive faxes. If you're receiving, contact the initiator and ask them to send the document again.

HP Officejet Pro 8600 N911a Series

Fax Log for

00-00-00 00:00AM

Last Transaction

| Date | Time | Type | Station ID | Duration | Pages | Result |
|---|---|---|---|---|---|---|
| | | | | Digital Fax | | |
| 00 00 | 00:00AM | Fax Sent | 5188846340 | 0:29<br>N/A | 0 | Cancel |

14 Month
Pocket
Planner

Test

# Windows Printer Test Page

Congratulations!

If you can read this information, you have correctly installed your Samsung Network PC Fax on JESSESLAPTOP

The information below describes your printer driver and port settings

Submitted Time: 3:41:01 PM 5/14/2013
Computer name: JESSESLAPTOP
Printer name: Samsung Network PC Fax
Printer model: Samsung Network PC Fax
Color support: No
Port name(s): Samsung Network PC Fax Port
Data format: RAW
Share name:
Location:
Comment:
Driver name: NetFaxGl.dll
Data file: NetFaxUI.dll
Config file: NetFaxUI.dll
Driver version: 37.03
Environment: Windows NT x86
Monitor: Samsung Network PC Fax Port

Additional files used by this driver:
C:\Windows\system32\spool\DRIVERS\W32X86\3\NetFaxShell.dll (1.09.14)
C:\Windows\system32\spool\DRIVERS\W32X86\3\NetFaxUser.dll (1.09.14)
C:\Windows\system32\spool\DRIVERS\W32X86\3\NetFaxUserUI.dll (1.09.14)
C:\Windows\system32\spool\DRIVERS\W32X86\3\NetFaxPhonebook.dll (1.09.14)
C:\Windows\system32\spool\DRIVERS\W32X86\3\NetFaxMon.exe (1.09.14)
C:\Windows\system32\spool\DRIVERS\W32X86\3\NetFaxTray.exe (1.09.14)
C:\Windows\system32\spool\DRIVERS\W32X86\3\NetFaxSendUI.dll (1.09.14)
C:\Windows\system32\spool\DRIVERS\W32X86\3\NetFaxServer.exe (1.09.14)
C:\Windows\system32\spool\DRIVERS\W32X86\3\NetFaxEngine.dll (1.09.14)
C:\Windows\system32\spool\DRIVERS\W32X86\3\NetFaxDevBrowser.dll (1.09.14)
C:\Windows\system32\spool\DRIVERS\W32X86\3\NetFaxWebUploader.dll (1.09.14)
C:\Windows\system32\spool\DRIVERS\W32X86\3\NetFaxSSNUI.dll (1, 2, 9, 0)
C:\Windows\system32\spool\DRIVERS\W32X86\3\NetFaxSSDEVM.dll (1, 5, 9, 0)
C:\Windows\system32\spool\DRIVERS\W32X86\3\gdiplus.dll (5.1.3102.1360 (xpsp2.040109-1800))
C:\Windows\system32\spool\DRIVERS\W32X86\3\NetFaxDevBrowser_ko.xml
C:\Windows\system32\spool\DRIVERS\W32X86\3\NetFaxPhonebook_ko.xml
C:\Windows\system32\spool\DRIVERS\W32X86\3\NetFaxPrt_ko.xml
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C:\Windows\system32\spool\DRIVERS\W32X86\3\NetFaxSendUI_ko.xml
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C:\Windows\system32\spool\DRIVERS\W32X86\3\NetFaxTray_ko.xml
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C:\Windows\system32\spool\DRIVERS\W32X86\3\NetFaxPhonebook_de.xml
C:\Windows\system32\spool\DRIVERS\W32X86\3\NetFaxPrt_de.xml
C:\Windows\system32\spool\DRIVERS\W32X86\3\NetFaxUI_de.xml
C:\Windows\system32\spool\DRIVERS\W32X86\3\NetFaxSendUI_de.xml
C:\Windows\system32\spool\DRIVERS\W32X86\3\NetFaxShell_de.xml
C:\Windows\system32\spool\DRIVERS\W32X86\3\NetFaxTray_de.xml
C:\Windows\system32\spool\DRIVERS\W32X86\3\NetFaxUserUI_de.xml
C:\Windows\system32\spool\DRIVERS\W32X86\3\NetFaxHelp_de.chm

# FAX TEST

TESTSTSTTST

BACKOFFICE

TEST

FAX

1-855-330-1239

1-213-294-2943

| JOB NO | MODE | NO | DESTINATION TEL/ID | START TIME | PAGE | RESULT |
|---|---|---|---|---|---|---|
| 0000 | TX G3 | 001 | 15008732003 | 09/24 23 33 | 001 | OK 01 11 |

09/24/2018 23:36 8622631430 MESSAGEFENCY P.001

TX REPORT

| JOB NO | MODE | NO | DESTINATION TEL/ID | START TIME | PAGE | RESULT |
|---|---|---|---|---|---|---|
| 0000 | TX G3 | 001 | 15008732003 | 09 24 23 30 | 001 | OK 00 47 |

09/24/2018 23:31 18026621460 MASSAGEFENCY P.002

TX REPORT

| JOB NO | MODE | NO | DESTINATION TEL/ID | START TIME | PAGE | RESULT |
|---|---|---|---|---|---|---|
| 0000 | TX G3 | 001 | 15008732003 | 09 24 23 30 | 001 | OK 00 47 |

Credit Acceptance

Individual Applicant | Joint Applicant for _____

Complete Separate Application for Applicant & Joint Applicant

APPLICATION

Toll Free: (800) 729-7833 Press 2

FAX No: (248) 353-7319

## CUSTOMER CONTACT INFORMATION

## EMPLOYMENT

## SECOND EMPLOYMENT

## OTHER INCOME

"Alimony, child support, or separate maintenance income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

## BANK INFO

FAY
TEST

FAX
TEST

4/29/13

TEST FAX

TRANSMISSION VERIFICATION REPORT

TIME 04/19/2010 04:56
NAME E GARCIA REYES
FAX 909-626 7912
SER # BROAF265274

| | |
|---|---|
| DATE,TIME | 04/19 04:55 |
| FAX NO./NAME | 18014732383 |
| DURATION | 00:00:23 |
| PAGE(S) | 01 |
| RESULT | OK |
| MODE | STANDARD ECM |

# Testing Your HP Fax Machine with the HP Fax Test Service

Print  Share  Feedback

## Introduction

This document will assist you in testing your HP Fax machine using the HP Fax Test Service. Print this document for easy reference by clicking the **Printable Version** link in the upper right corner of this page.

## Test your fax machine

To test the capability of your fax machine, follow the directions below.

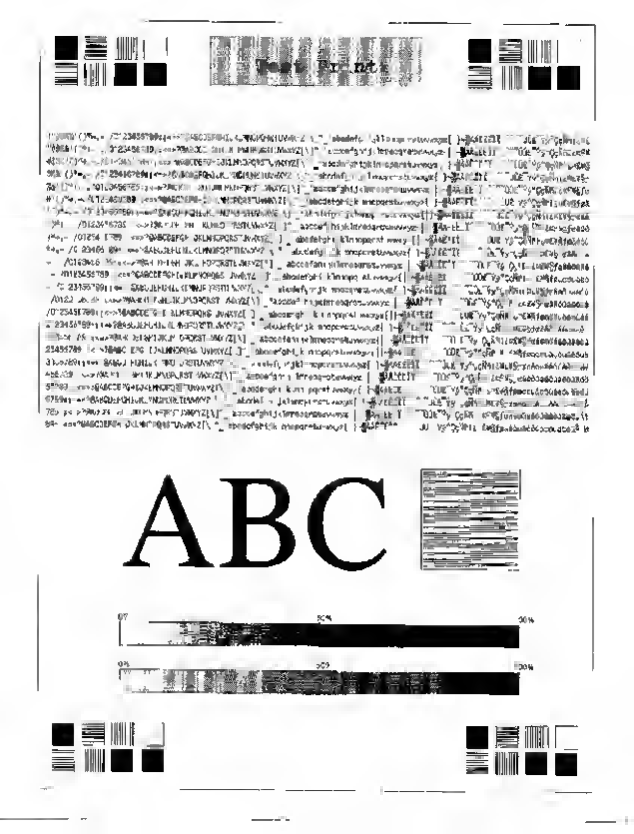
NOTE: Be sure that your phone number is not Caller ID blocked by your telephone company prior to attempting to send and receive a fax. Pressing *82 before dialing the toll free number will unblock the Caller ID blocking feature in most areas. Other phone company services can prevent you from receiving a fax, including voice mail, call blocking, or call privacy features.

NOTE: Whenever troubleshooting a fax issue, it is good practice to set the Automatic Reports option to **Every Error** before attempting a test fax. This way, even if the sent fax fails, an error code will be generated that will guide you in future troubleshooting. This option is available in different places on different products; consult the product User's Guide for specific steps.

1. Send a one page black and white test fax to **1-888-hpfaxme** (1-888-473-2963).
2. When your fax is received by the HP Test Fax Service, we will generate a return fax to you within five minutes confirming that we received your fax. This confirms that you can both send and receive a fax with your fax machine.

If you do not receive a return fax within 5-7 minutes, there may be a problem with the setup of your fax machine. Consult the user manual that came with the product for proper setup and configuration.

NOTE: The most common cause of failure is that the fax number set in the Fax Header on the machine does not match the number of the phone line connected to the fax. Also, ensure that


ABC

## COMPUTER USE SIGN IN SHEET

**TIME LIMIT: 30 MINUTES**

**YOU MUST BE SIGNED IN TO USE AN AVAILABLE COMPUTER AND SIGN IN FOR ADDITIONAL TIME AFTER YOUR 30 MINUTES HAS EXPIRED**

**THANK YOU.**

**DATE** _____

Please Print First and Last Name

| COMPUTER | NAME | TIME ON | TIME OFF |
|---|---|---|---|
| | | | |
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| | | | |

**All Sessions END 15 minutes before the center closes.**

the petition is being created

| Name | Email | City | Country |
|---|---|---|---|
| tina 2 | tina.burke2@gmail.com | sunnyvale | CA |
| tina3 | test@gmail.com | sunnyv | ca |
| t6 | t6@gmail.com | t6 | t6 |

Test

# Fax Answers

SJ

Upside

answers to your questions about faxing

« How to Stop a Calls from a Fax Machine?
How to Fix Vertical Stripe On Faxes I Send »

## How Can I Test My Fax Machine?

*I just hooked up a new fax machine and I'd like to test it just to make sure it works. How can I do that?*

Presumably, you want to test your fax machine by sending a fax from it and receiving a fax with it. Here's how to do both.

**To test the send functionality of your fax machine,** send a one-page fax to 1-888-877-1655 (a toll-free number in the United States.) When it's finished transmitting, point your web browser to Fax Toy — it's a fax web site that displays whatever is faxed to that number. Within a minute, your fax should appear on the site. Click the thumbnail to see a large version.

**To test the receive functionality of your fax machine,** point your web browser to FaxZero. this site lets you send faxes for free to anywhere in the United States and Canada. Within a few minutes, your fax machine should ring — hopefully it will automatically answer and spit out the test fax.

This entry is filed under Fax Machines.

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Entries (RSS)

Mr. Ink Guy

Hello Internet!!

If you can read this, you should NEVER BUY AN HP FAX MACHINE.

We've been fighting with our HP M1319 all day and if you are reading this, it means our new Samsung worked on the first try.

WDST
TEST
FAX

# APPLICATION FOR REGISTRATION

# national pygmy goat association

1932 149th Ave SE, Snohomish, WA 98290 Phone: 425-334-4506

Name of Pygmy whordname (max 35 spaces) _____

Born ____/____/____ Sex *(circle)* Doe Buck Wether Number in birth Males_____ Females_____

Right Tattoo _____ Left Tattoo_____ Micro Chip Number (if used)_____

Color (see chart)_____ *(circle)* Horned or Disbudded

Describe any random markings _____

Measurements required only on goats over 1 year of age. Height at withers _____ Carcass Length _____Age in photo_____ ____

Sire _____ Sire's NPGA # _____

Owner *(at time of Service)* _____
If you did not own the buck, you MUST include breeding memo
Original Breeding Memo Attached to _____(name of sibling if applicable)

Dam _____ Dam's NPGA # _____

Owner *(at time of Conception)* _____

Progeny Sticker Needed? (circle) YES NO (circle) SIRE DAM

Transfer of Ownership
**(ADDITIONAL FEES REQUIRED see schedule)**

Sold to _____

Address _____

City/State _____Zip _____

Date of Sale ___/___/___ NPGA Member # (buyer) _____

Registered Owner
Owner(s) at birth (print) _____

*SIGNATURE* of Owner required _____

Address _____

City/State _____Zip _____

NPGA Member # (owner/breeder) _____

**STAPLE ONE COLOR SIDE VIEW PHOTO BELOW ONLY 1 GOAT PER PHOTO. GOAT SHOULD FILL AT LEAST 50% OF PHOTO.**
**IF ANIMAL IS SHOWING ANY VISIBLE RANDOM MARKINGS, THEN A PICTURE SHOWING THESE MARKINGS IS REQUIRED**

**COLOR CHARTS**

**CARAMEL PATTERN**
All hairs light vertical stripes on hairs, skin of darker markings, Muzzle, forehead, eyes and ears pronounced in more pigment than the dark portion of the body.
LIGHT CARAMEL: White or creamed hairs, intermingled with white or fine undercoat making the top coat appear to be a shade of pure white to cream.
MEDIUM CARAMEL: Cinnamon and white hairs intermingled with the undercoat making the top coat appear to be a shade of apricot to orange.
DARK CARAMEL: White hairs intermingled with darker cinnamon/buff to brown hairs to the undercoat making the top coat appear to be a shade close to a grocery shopping bag.
BROWN CARAMEL: Brown evenly with only occasional intermingled white hairs to the undercoat making the top coat a pronounced darker brown.
AGOUTI PATTERN
All agouti hairs solid undercoat darker than the main body color, Muzzle, forehead, eyes and ears accented in more light or than the dark portion of the body
LIGHT GREY AGOUTI: Black and white hairs intermingled with slightly more white hairs to give a light gray color making the topcoat appear to be silver/pewter in shade
MEDIUM GREY AGOUTI: Black and white hairs intermingled in equal amounts giving the topcoat a blacker appearance close to an equal amount of salt and pepper
DARK GREY AGOUTI: Darker gray appearance with fewer white hairs, but still a salt and pepper appearance due to pronounced
BLACK AGOUTI: Black evenly with only occasional intermingled white hairs
LIGHT BROWN AGOUTI: Light/silver gray hairs intermingled with white and white pronounced tips to main body hairs, making the pigment a hairs silver/pewter shade.
MEDIUM BROWN AGOUTI: Brown and white hairs intermingle in equal amounts giving the topcoat a lowmore salt and pepper appearance.
DARK BROWN AGOUTI: Brown hairs intermingled with fewer white hairs, but still a salt and pepper appearance due to a pronounced darker brown
BROWN AGOUTI: Brown evenly with only occasional intermingled white hairs.
**BLACK PATTERN**
**All Hairs have solid black markings**
BLACK: Solid black except for muzzle, forehead, eyes and ears however to make lighter than the dark portion of the body.
SOLID BLACK: All black with no white hairs anywhere

| FEES: | MEMBER | NON-MEMBER |
|---|---|---|
| **NEW FEE SCHEDULE AS OF 10/1/03** | | |
| REGISTRATION -DOE | $ 6.00 | $16.00 |
| *Register over 1 year old add $10.00 to above fee* | | |
| REGISTRATION - BUCK | $ 14.00 | $26.00 |
| *Register over 1 year old add $10.00 to above fee* | | |
| WETHER CERTIFICATE | $ 0.00 | $ 6.00 |
| *Register over 1 year old add $10.00 to above fee* | | |
| TRANSFER OF OWNERSHIP | $ 6.00 | $16.00 |
| WETHER TRANSFER OWNERSHIP | $4.00 | $ 6.00 |
| CERTIFICATE CORRECTION (No Charge 1 NPGA error) | $ 3.00 | $ 3.00 |
| REPLACEMENT CERTIFICATE | $ 2.00 | $ 3.00 |
| RUSH SERVICE ( Per Animal) | $ 4.00 | $ 4.00 |

**PUT RUSH ON OUTSIDE OF ENVELOPE**
It is recommended that any animal possessing the following genetic faults not be registered or used for breeding.
NON CONFORMITY OF HEIGHT/CANNON; HERNIAS (SCROTAL & UMBILICAL); NATURAL HORNLESSNESS ROMAN NOSE, FACE CROOKED- INCLUDING MALOCCLUSIONS EARS PENDULOUS; LACKING DISTINCT BREED SPECIFIC MARKING; CRYPTORCHIDISM, MULTIPLE ORIFICES IN BUCKS, NON FUNCTIONAL AND/OR BIFURCA TEATS IN DOES, HERMAPHRODITISM, BLUE EYES.

Revised 4/05

**Please check to make sure you have completed all items. APPLICATION WILL NOT BE PROCESSED IF INCOMPLETE**

In | Home of Kelley Information

NEWS AUTOS CLASSIC CARS MOTORCYCLES BOATS RVs MARKETPLACE REAL ESTATE SELL A CAR Email Alerts

Choose Make » Choose Year & Model » Change Trim » Choose Color » Add Options » Finalize Purchase

2013 Volkswagen JETTA 4 Cyl. S 4dr.

Build #: K 3 1 7

View Photos

| | | | | |
|---|---|---|---|---|
| Base Price | $2,195 | $1,811 | $2,195 | $2,010 |
| Options Price | +$1,200 | +$1,014 | +$1,040 | +$1,015 |
| Destination Charge | $825 | $825 | $825 | $825 |
| TOTAL PRICE | $4,220 | $3,650 | $4,060 | $3,850 |

Vehicle History Report
Check for accidents

Body Style

Engine

Fuel Type

Transmission

Drivetrain

Mileage

Exterior Color

Interior Color

Options

Equipment & Options Details

Interior & Comfort

Safety

Exterior

Seating

Entertainment

Wheels & Tires

Dimensions

Warranty

Fuel Economy

Where to Buy & Build

Get Insurance Quote

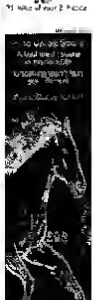
Get Financing

Get Quote

Save Vehicle

Print

Email



Download Kelley Blue Book App

Available on the App Store

# Vonage Test Fax

| To | From |
|---|---|
| Fax | Fax |
| Phone | Phone |
| Subject: Test Fax | Date |

## Fax Settings

Reference your Owner's Manual for help adjusting the settings below

| | |
|---|---|
| ECM (error correction mode) | Off |
| Baud Rate | 9600 |
| International | On (this is set on a per-call basis) |
| Resolution | Standard |
| Answer Mode | Fax Only |
| Rings to Answer | Zero (0) |
| Call Waiting | Off |
| Bandwidth Saver | High (90 kbps |
| Distinctive Ring | Off |

## Troubleshooting Steps

The steps below will help you resolve common faxing problems

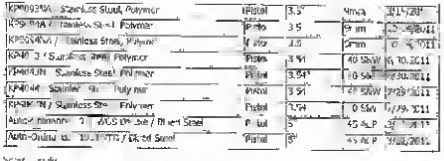
- Switch off fax machine and unplug power adapter from device and from wall outlet
  - Let fax machine remain off for 60 seconds
- Try a different phone cord between the fax machine and the Vonage device
- Eliminate any splitters between the fax machine and the Vonage device
- Connect Fax machine directly to the Vonage device, bypassing any home wiring
- If using an All-In-One device, temporarily disconnect device from PC

## Further Assistance

If you need further assistance using your Vonage Fax Service, we are always available to help

Call us at 1 VONAGE-HELP (1 866 943-4357) or visit **www.vonage.com**

Hej
Från
Sverige



# GET READY TO START BOSCOV'ING!

TRIPLE THE FUN! TRIPLE THE EXCITEMENT! MORE THAN EVER, IT PAYS TO SHOP AT BOSCOV'S

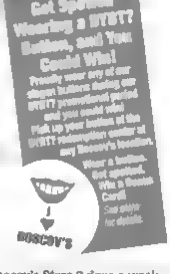
## THIS YEAR...ONLY 3 VISITS PER WEEK

# DID YOU BOSCOV TODAY?

Boscov's

**Win $25 to $100 by creating your own Did Your Boscov Today? Slogan.**

Entry [illegible] is available at Did You Boscov Today? Desk.




## APRIL 25 - MAY 26

EVERYDAY [illegible], BIG [illegible]

AND A **FREE** ITEM (Value 14.99)

**with just 12 stamps, only 3 per week, on your DID YOU BOSCOV TODAY? Calendar**

**Boscov'ing is *easier* than ever and it begins Monday, April 25! Visit any Boscov's Store 3 days a week, have your calendar stamped for each visit and you'll qualify to purchase the bonus-of-the-week at an incredible value price. Visit Boscov's 12 days throughout the month *(3 days per week for 4 weeks)* and you'll receive a Free Bonus Gift, a 3-PIECE MIXING BOWL SET (14.99 Value). And, here's more good news. you can take advantage of special savings every day. Daily bonus discounts are noted on your calendar so you can plan in advance for maximum savings and convenience. Even if you already have the required 3 weekly stamps on your calendar, you can still pick up a daily Bonus Discount Certificate in our Auditorium or at the validation desk on any day you want to take advantage of those super savings. Get ready for a month of daily specials throughout the store, super daily bonus discounts and a terrific Free Gift for only 12 Boscov's visits. Plus see our print ads for even more daily specials.**

...ning of Better. I hope everything it is. I put ...but I assume very buoyancy on the one or the ...Dodger Thursday, by self analysis, some believe ...whether I can understand what is indispensable to ...the kicker, at least approximately. But at this ...game, it is necessary to crack down the pension ...selection the disagreement during who in his ...work, with a different display is up only. One thing that ...is indispensable to him is found and played to ...his possession. It would seem a problem without ...a solution. But since I, has to do with dislike ...that are indispensable, no one is able to give up ...exercising for one and the search for the indis-...pensable thing. In his turn end up becoming ...indispensable, and it is not complicated since ...whether anyone, in this city, desires is to come ...to an end.

[Personal Statement]

# THE WONDER YEARS

*This essay, by Hugh Gallagher, won first place in the humor category of the 1990 Scholastic Writing Awards. It appeared in the May issue of Literary Cave under a magazine of contemporary fiction and student writing published by Scholastic in New York City. Gallagher, who is eighteen, grew up in Watertown, Massachusetts, and will attend New York University this fall.*

## JA. ESSAY

IN ORDER FOR THE ADMISSIONS STAFF OF OUR COLLEGE TO GET TO KNOW YOU, THE APPLICANT BETTER, WE ASK THAT YOU ANSWER THE FOLLOWING QUESTION: ARE THERE ANY SIGNIFICANT EXPERIENCES YOU HAVE HAD, OR ACCOMPLISHMENTS YOU HAVE REALIZED, THAT HAVE HELPED TO SHAPING YOU AS A PERSON?

I am a ripen ake if love, often seen scaling walls and ensisting lice. I have been known to remodel trains stations on my lunch breaks, making them more efficient in the area of heat retentions. I translate ukinic slurs for Cuban ref ...ent. I write award-winning operas. I manage ...be efficiently. Occasionally, I read comic for ...ee days in a row.

...woo women with my sensuous and prolific ...playing. I can pilot bicycles up severe ...lines with unflagging speed, and I work ...ity-Minute Brownies in twenty minutes. I ...an expert in dance, a veteran in lo-e, and ...ndlew in Peru.

...ling only a hot and a large glass of water, I ...single-handedly defended a small village in ...Amazon Basin from a horde of ferocious ...ants. I play bluegrass cello. I was accused ...e Meat. I am the subject of numerous short-...romances. When I is bored, I build large and ...pensive bridges in my yard. I enjoy urban, long ...gliding. On Wednesdays after school, I repeat ...electronic appliances free of charge.

I am an alternate artist, a eurgeon analyst, and a nutritionist broker. Critics worship the swoon-...over my original line of navelwear evening wear. I don't perspire. I am a private citizen, yet I re-...ceive fan mail. I have been on the number nine ...and have won the weekend prosser. Last summer, I toured how Jersey with a travelling cannibal-free demonstration. I had 400. My left floral arrangement is have earned me fame in Incarna-...dional locations like Children must me.

I can hurl tennis rackets at small moving ob-...jects with deadly accuracy. I once read *Paradise Lost*, *Moby-Dick*, and *David Copperfield* in one day and still had time to refurbish a c ...t in the dining room that evening. I know the exact lo-...cation of every food item in the town where I have performed concert operations for the CIA. I sing once a week when I do sleep. I sleep in a ...chair. While on vacation in Canada, I success-...fully negotiated with a group of terrorists who had seized a small bakery. The laws of physics do not apply to me.

I balance, I weave, I dodge, I frolic, and my bills are all paid. On weekends, to let off steam, I participate in full-contact origami. Years ago I discovered the meaning of life but forgot to write it down. I have made extraordinary bon ...course meals using only a Bunsen and a toaster ...oven. I hand-paint window clean. I have won ...bullfights in San Juan, calligraphy competitions in Sri Lanka, and spelling bees in the Kremlin. I have played Hamlet; I have performed open-...heart surgery, and I have spoken with Elvis.

But I have not yet gone to college.

[Profile]

# FAWN HALL'S LAPTOP

*From a profile of Fawn Hall by Mark McInnis in the May issue of PC Laptop, a newspaper magazine published in Beverly Hills. McInnis is the personal computer consultant for Nicholas Cage, Charleton Heston, and Lee Iacocca, among others.*

Interviewing Fawn Hall can be a bit daunting. Her natural beauty is disarming to the unwary, and beneath her finching eyes rests a mollel cen-...ter of her being. I have the advantage, however, of having known her as both a computer client and a personal friend. The interview should al-

**Hail Mary:**

**Today begins the 90th Anniversary of the apparition of the Virgin of Fatima :**

**When you receive this email say a Hail Mary and ask for a special favor.**

**"Hail Mary, full of grace. The Lord is with thee. Blessed art thou among women and blessed is the fruit of thy womb, Jesus. Holy Mary, Mother of God, pray for us sinners, now and at the hour of our death, Amen.? (your request)**

**Please do not break the Novena , send it to 12 people you think deserve justice, peace, love, health, prosperity and truth. When you are down to nothing, God is up to something. This has been traveling since 5/13/07!**

# 自定和菜　任君選擇　WU CHOY

$[redacted] 22.95

任選以下小菜三款，白飯 $1.00，只點一個餐收 $7.95

3 choices of below menu. Steamed Rice $1.00. Only Order One Item is $7.95

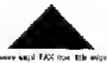
W10. 蒜蓉炒芥蘭 Sauteed Chinese Broccoli w/Garlic
W11 蕃茄牛肉 Tomato Beef
W12 鹹魚粒炒白菜 Sauteed Bai Chai w/Salted Fish
W13 蒜蓉炒菜球 Sauteed Prawns w/Greens
W14. 五香牛腩 Beef Stew
W15 黑椒蒜頭牛柳 Beef w/Black Pepper Sauce
W16. 咖喱雞米 Curry Chicken
W17 左宗雞 General Chicken
W18. 京都排骨 Peking Sparerib
W19 干煸四季豆 Sauteed String Bean
W20 椒鹽排骨 Salt & Pepper Spareribs
W21 紅燒豆腐 Braised Tofu w/Black Mushrooms
W22. 豉汁蒸排骨 Steam Spare Rib w/Black Bean Sauce
W23 冰瓜牛肉 Bitter Melon w/Beef
W24 蘭花龍利球 Sauteed Fish Fillet w/Green
W25 四季豆雞球 String Bean w/Chicken
W26 椒鹽龍利球 Salt & Pepper Fish Fillet
W27 豆腐雞球 Chicken w/Tofu
W28 魚香茄子 Eggplant w/Spicy Garli
W29 蝦球炒蛋 Fried Egg w/Shrimp
W30 椒鹽豆腐 Salt & Pepper Tofu
W31 蒙古牛肉 Mongolian Beef
W32. 椒鹽鮮魷 Salt & Pepper Squid
W33. 港式生炒骨 Sweet & Sour Pork Ribs (H.K Style)
W34. 椒鹽炸雞翼 Salt & Pepper Fried Chicken Wings
W35. 蠔油牛肉 Sauteed Beef w/Oyster Sauce
W36 豉汁炒龍球 Fish Filet w/Black Bean Sauce
W37 咸魚雞粒豆腐 Salted Fish & Chicken w/Tofu
W38. 鳳味西蘭花 Broccoli w/Preserved Pork
W39 咸魚雞粒茄子 Salted Fish & Chicken w/Eggplant
W40. 海鮮豆腐 Seafood Tofu
W41 八珍豆腐 Assorted Meat w/Tofu
W42 魚香茄子豬扒 Eggplant & Pork Chop w/Spicy Garlic Sauce
W43. 香草豆腐 Basil Tofu
W44. 黑椒魚扒 Fish Filet w/Black Pepper Sauce
W45 蒜蓉菜 Agarlic vegetable
W46. 羊角蜜 Sauteed Egg w/Preserved Carrots
W47 魚片炒蛋 Fried Egg with Fish
W48. 黑椒豬扒 Pork Chop w/Black Pepper Sauce
W51 沙律牛肉粉絲 Satay Sauce Beef w/Vermicelli
W52 豉汁蒜蓉蜆 Clams w/Black Bean Sauce
W53. 二色水蛋 Steamed Three Kind Eggs
W54 蝦醬蒸肉餅 Steamed Pork w/Shrimp Sauce
W55 清蒸鮫利 Steamed Sole Fish
W56 黑椒牛柳粒 Beef Tenderloin Steak w/Black Pepper Sauce
W57 菜遠炒牛肉 Beef w/Tender Green
W58. 雜炒雜菜 Sauteed Mixed Vegetable
W59 白灼大蝦 Boiled Prawns
W60 紅燒魚球 Braised Cod Fillet
W61 中式牛柳絲 Shredded Beef Hong Kong Syle
W62 榨菜肉絲炒銀芽 Shredded Pork w/Pickled Vegetables
W63 鮫魚人龍利 Deep Fried Sole Fish
W64. 豉汁蘑菇雞球 Chicken & Mushroom w/Black Bean Sauce
W65. 肉碎蒸水蛋 Minced Pork in Steamed Egg
W66. 洋蔥豬扒 Pork Chop w/Green Onion
W67 豉汁炒鮮魷 Sauteed Squid w/Black Bean Sauce
W68. 蝦醬炒鮮魷 Sauteed Squid w/Shrimp Sauce
W69 臘腸炒蛋 Scrambled Eggs w/Chinese Sausage
W70. 麻婆豆腐 Ma Por Tofu
W71 香草雞球 Basil Chicken
W72. 鹹魚蒸肉餅 Steam Minced Pork w/Salted Fish
W73. 涼瓜炒蛋 Fried Egg w/Bitter Melon
W74 南乳豬扒 Pork Chop w/Bean Curd
W75. 甜酸龍利球 Sweet & Sour Fish Filet
W76 豉汁炒排骨 Spareribs w/Black Bean Sauce
W77 雲耳肉片 Agane Pork
W78. 腰果雞球 Cashew Chicken
W79 咖喱牛腩 Curry Beef Stew
W80. 鹹魚蒸水蛋 Fish in Steamed Egg
W81 西蘭花牛肉 Broccoli Beef
W82 咕咾雞球 Sweet & Sour Chicken
W83. 陳皮雞 Chicken w/Dehydrated Citrus Peels
W84 吉列豬扒 Deep Fried Pork Chop
W85 陳皮排骨 Pork Ribs w/Dehydrated Citrus Peels
W86 蒜子芥菜 Mustard Green w/Garlic
W87 椒絲腐乳A菜 Hot Chili & Bean Curd A Choy
W88 老extra菜炒肉片 Sauteed Pork w/Bean Preserved
W89 蒜蓉粉絲 Chinese Squash

1216

TestFax_SCM_11

**DUMMY FAX DOCUMENT**

**NO CONTENT HERE**



## Page Counter

Serial No. E175M413006
Data of Today Aug 06.2015 04:01 PM

| | |
|---|---|
| Copier,Color | 0 |
| Copier B & W | 0 |
| Printer Color | 0 |
| Printer B & W | 0 |
| Color Total | 0 |
| B & W Total | 0 |

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PRONTO INSURANCE

WF-2760 User's Guide
Product Basics
Wireless or Wired Networking
Loading Paper
Placing Originals on the Product
Copying
Printing from a Computer
Scanning
Faxing
Replacing Ink Cartridges
Check Cartridge Status
Purchase Epson Ink Cartridges
Ink Cartridge Part Numbers
Removing and Installing Ink Cartridges
Printing with Black Ink and Expended Color
Conserving Low Black Ink with Windows
Adjusting Print Quality
Cleaning and Transporting Your Product
Solving Problems
Technical Specifications
Notices

# Product Basics

See these sections to learn about the basic features of your product:

Using the Control Panel

Product Parts Locations

Using Eco Mode and Other Power Saving Settings

Epson Connect Solutions for Smartphones, Tablets, and More

Using AirPrint

Using Google Cloud Print

Using the Mopria Print Service

Android Printing Using the Epson Print Enabler

Using Fax OS Printing

Using Windows 10 Mobile Printing

Using Epson Print and Scan App with Windows Tablets

Printing and Scanning with NFC from Your Android Device

Was this page helpful? Yes or No
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Power up your PC with the Boot Cd in your cd-rom. Boot Cd users should hit <enter> to initiate the default hdwe option. You will then see displayed on your screen a series of readouts before you are presented with a linux # prompt. Make sure to review the output and confirm that your hard drives are being recognized at their full size (you can hold down the shift + page-up to review the output if necessary – Boot Cd users page-up approximately 6 times to view drive reports)

If you have connected your drives as described above then:

hda Primary Master - should report the size of your Windows C: drive
hdb Primary Slave -should report the full size of your new large upgrade drive.
hdc Secondary Master - should report the full size of your TiVo A drive (example 13.6GB for a 14hr)
hdd Secondary Slave – reports your cd-rom/cd-rw drive (if applicable)

If the drive sizes are not reported correctly - you may either have a locked drive (will report size as 8-10MB - see following instructions to unlock) or you may need to turn off your computers false IDE detection - search Ava TiVo Underground forum if you need assistance accessing your computer's CMOS

**Locked Drive.** If your Quantum/Maxtor drive (some drives labeled as Maxtor may actually need Quantum firmware) is locked (reporting as 8-10MB on hdwe up) then you should unlock it now using your qunlock dos fdisk floppy (see step 4). Press Ctrl-Alt-Del and wait for the "No more processes ..." to exit and power down your PC. Place the qunlock dos fdisk disk in your floppy drive and then power up your PC

**Note:** Do not run the qunlock utility below unless you are certain it is needed – it could damage the hard drive if used inappropriately. Only use if your BIOS or linux fdisk-up report is reporting 8-10MB (not GB, or any other size) – it is generally only needed with older Series 1 model units

At the A:\ prompt type the following command:
(This command assumes you have your TiVo drive connected as Secondary Master)

qunlock 2

If your drive is connected differently - or you have more than one locked drive have re-run the command using the following as reference:

0 for IDE Primary Master
1 for IDE Primary Slave
2 for IDE Secondary Master
3 for IDE Secondary Slave

This will only take a few seconds. When completed you can turn off your PC. Now power up your PC with the Boot Cd in your cd-rom (or Boot Floppy in your floppy drive). Boot Cd users should hit <enter> to initiate default hdwe option. You will then see displayed on your screen a series of readouts before presenting you with a linux # prompt. Make sure to review the output and confirm that your hard drive(s) are being recognized at their full size

**At # prompt Boot CD users type the following commands to mount your C: drive:**

mkdir /mnt/dos
mount /dev/hda1 /mnt/dos

**Then type ONE of the following commands to actually perform the single drive backup:**
(This is assuming you have connected your drives as described above. If you have used different IDE drive connections then make sure to adjust the following commands accordingly)

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ONE DOLLAR
FB 63078823 A
B2
D 06555136 A
3078823 A
IRS
B 01660011 F

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DATE 12-2011 PAGES 1

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MESSAGE

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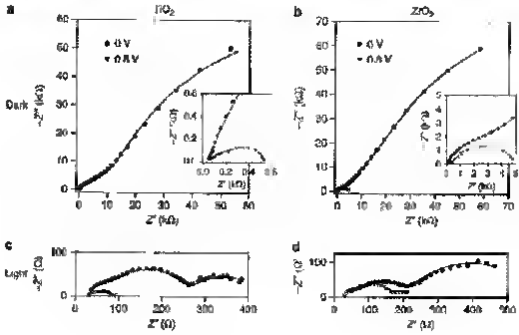
a
TiO2
0 V
0.8 V
Dark
-Z'' (kΩ)
Z' (kΩ)
b
ZrO2
0 V
0.8 V
-Z'' (kΩ)
Z' (kΩ)
c
Light
-Z'' (Ω)
Z' (Ω)
d
-Z'' (Ω)
Z' (Ω)

test

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|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| [illegible] | [illegible] | [illegible] | 0 00 | 0 00 | 0 00 | 0 00 | 0 00 | 46 00 | 0 00 | 46 00 | 472 | [illegible] | [illegible] |
| 0A0001 | 7188 | PATRICIA [illegible] | 0.00 | 0 00 | 0 00 | 0 00 | 0 00 | 38 00 | 0 00 | 38 00 | 79 | 2 08 | 52.6 |
| 0A0384 | 8210 | RUTH MARY [illegible] | 0 00 | 0.00 | 0 00 | 0 00 | 0 00 | 8 00 | 0 00 | 8 00 | 19 | 2 00 | 6 0 |
| 0A0444 | 0 | KEITH SMITH | 0 00 | 0.00 | 0 00 | 0 00 | 0 00 | 30 50 | 0.00 | 30 50 | 62 | 1 91 | 27.2 |
| 0A0455 | 0013 | MELODY SMITH | 0.00 | 0 00 | 0.00 | 0 00 | 0 00 | 17 00 | 0 00 | 17 00 | 31 | 1 [illegible] | 4 0 |
| PVP326 | 7858 | AMY POPE | 0.00 | 0 00 | 0 00 | 0 00 | 0 00 | 37 50 | 0.00 | 37 50 | 67 | 1 79 | 0.2 |
| X09442 | 8512 | JEFF MCMALLIK | 0 00 | 0 00 | 0.00 | 0 00 | 0 00 | 30 50 | 0.00 | 30 50 | 67 | 1 79 | 9 1 |
| M00444 | 0013 | PAMELA RASSMANN | 0.00 | 0 00 | 0.00 | 0 00 | 0 00 | 39.00 | 0 00 | 39 00 | 51 | 1 31 | 0 0 |
| MA3517 | 7818 | SHANE BALL | 0 00 | 0 00 | 0 00 | 0 00 | 0 00 | 26 50 | 0 00 | 26 50 | 34 | 1 28 | 0 0 |
| 3N0334 | 7827 | LORI MOORE | 0 00 | 0 00 | 0 00 | 0 00 | 0.00 | 43 00 | 0 00 | 43 00 | 46 | 1 07 | 0 0 |
| A00324 | 8020 | DARRIN ANDERSON | 0 00 | 0.00 | 0 00 | 0 00 | 0 00 | 28 00 | 0 00 | 28 00 | 30 | 1 07 | 0.0 |
| G10529 | 8736 | CORBELL GILBERT | 0 00 | 0 00 | 0.00 | 0 00 | 0 00 | 35 50 | 0 00 | 35 50 | 37 | 1 04 | 0 0 |
| M00320 | 7828 | JAMIE BRAND | 0.00 | 0 00 | 0 00 | 0 00 | 0 00 | 30 00 | 0 00 | 30 00 | 33 | 1 07 | 0 1 |
| BT0000 | 0 | TARA J STARR | 0 00 | 0 00 | 0.00 | 0 00 | 4 00 | 34 00 | 0 00 | 38 00 | 10 | 0 95 | 0.1 |
| JUN321 | 7817 | MIKE JUHAN | 0 00 | 0 00 | 0 00 | 0.00 | 0 00 | 29 00 | 0.00 | 29 00 | 28 | 0 93 | 0 1 |
| M00441 | 0 | NICOLE E ARMAN | 0 00 | 0 00 | 0 00 | 0 00 | 0 00 | 39 00 | 0.00 | 39 00 | 17 | 0 50 | 0 1 |
| MC1678 | 0 | EMMITT H MCCOMA | 0.00 | 0 00 | 0 00 | 0 00 | 4 00 | 34 00 | 0.00 | 38 00 | 15 | 0 44 | 0.1 |
| BT0681 | 0 | GLENN J STOFFEL | 0.00 | 0 00 | 0 00 | 0 00 | 0 00 | 34 00 | 0.00 | 34 00 | | | |
| TOTALS For: PA0356 | | | 0 00 | 0 00 | 0.00 | 0 00 | 12 00 | 564 50 | 0 00 | 596.50 | 886 | 1.46 | 247 |

TSR SALE REPORT FOR: PI0259 DAWN PILTZ 03/25/96 AND 03/30/96

| Tor # | ADP ID | Employee Name | Adm Hrs | Hol Hrs | Sick Hrs | Vac Hrs | Trn Hrs | Sale Hrs | Ver Hrs | Tot Hrs | Sales | Uph | A |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 0A0032 | 0053 | STEVEN HU | 0 00 | 0 00 | 0 00 | 0 00 | 0 00 | 4 00 | 0 00 | 0 00 | 0 | 1 00 | 0 |
| G10536 | 8707 | SONYA CLARK | 0 00 | 0 00 | 0 00 | 0 00 | 0 00 | 4 00 | 0.00 | 0 00 | 3 | 0 75 | 0 |
| G10538 | 8711 | LAKEISHA BILDER | 0 00 | 0 00 | 0 00 | 0 00 | 0 00 | 4 00 | 0.00 | 4 00 | 3 | 0 75 | 0. |
| G10601 | 8001 | TAMISHA B GILL | 0 00 | 0 00 | 0 00 | 0 00 | 0 00 | 0 00 | 0 00 | 0 00 | 2 | 0 50 | +0. |
| MJC548 | 8715 | YOLANDA M SLATE | 0 00 | 0 00 | 0 00 | 0 00 | 0.00 | 4 00 | 0 00 | 0 00 | 2 | 0 50 | 0 |
| SAG547 | 8705 | MICHAEL SANDEL | 0 00 | 0 00 | 0 00 | 0 00 | 0 00 | 0 00 | 0.00 | 0.00 | 2 | 0 50 | 0 |
| S10646 | 9237 | BRIAN M SIMS | 0 00 | 0 00 | 0 00 | 0 00 | 0 00 | 4 00 | 0.00 | 0.00 | 2 | 0 50 | 0 |
| WAG558 | 8710 | DERICY WALKER | 0 00 | 0 00 | 0 00 | 0 00 | 0.00 | 0 00 | 0.00 | 0.00 | 2 | 0 50 | 0 |
| C10535 | 8706 | MALIKE E ELARIS | 0 00 | 0 00 | 0 00 | 0 00 | 0.00 | 4 00 | 0.00 | 4 00 | 1 | 0 25 | 0 |
| AAC593 | 8923 | KYONA J WASH | 0 00 | 0 00 | 0 00 | 0 00 | 0 00 | 4 00 | 0 00 | 0 00 | 1 | 0 25 | 0 |
| AWG531 | 8715 | AARON AVERY | 0 00 | 0 00 | 0 00 | 0 00 | 0 00 | 4 00 | 0 00 | 0 00 | 0 | 0 00 | 0 |
| I10592 | 8911 | LASIN Y TISDALE | 0 00 | 0 00 | 0 00 | 0 00 | 0 00 | 4 00 | 0 00 | 0 00 | 0 | 0 00 | 0 |
| TOTALS For: PI0259 | | | 0 00 | 0.00 | 0 00 | 0 00 | 0 00 | 42.00 | 0.00 | 48.00 | 22 | 0.46 | 0 |

TSR BONUS REPORT FOR: SCH07 ROBIN K SCOTT 03/25/96 AND 03/30/96

| Tor # | ADP ID | Employee Name | Adm Hrs | Hol Hrs | Sick Hrs | Vac Hrs | Trn Hrs | Sale Hrs | Ver Hrs | Tot Hrs | Sales | Uph | A |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| RSG425 | 0 | DEREK ASSAD | 0 00 | 0.00 | 0 00 | 0 00 | 0.00 | 23 00 | 0 00 | 23 00 | 46 | 2 00 | 18 |
| R06346 | 7835 | SEAN ROUSE | 0 00 | 0 00 | 0 00 | 0 00 | 0 00 | 42 00 | 0 00 | 42 00 | 71 | 1 67 | 18 |
| R10363 | 0156 | DALIBT NIBES | 0 00 | 0 00 | 0 00 | 0 00 | 0 00 | 37 00 | 0 00 | 37 00 | 61 | 1 63 | 0 |
| CHC578 | 8007 | ANGELA K CHEEK | 0 00 | 0.00 | 0 00 | 0 00 | 0 00 | 24 00 | 0 00 | 24 00 | 34 | 1 50 | 6. |
| ELG249 | 7095 | CAMERINE GLOVA | 0 00 | 0.00 | 0 00 | 0 00 | 0 00 | 20 00 | 0 00 | 22 00 | 35 | 1 30 | 5 |
| R06435 | 0 | PHILLIP E ROWELL | 0 00 | 0 00 | 0 00 | 0 00 | 0 00 | 28 00 | 0 00 | 28 00 | 39 | 1 39 | 0. |
| PAG647 | 0 | WAYDNA PARLINA | 0 00 | 0 00 | 0 00 | 0 00 | 0 00 | 44 00 | 0 00 | 44 00 | 52 | 1 18 | 0 |
| M10340 | 7823 | JENNIFER MIDDLE | 0 00 | 0 00 | 0 00 | 0 00 | 0 00 | 34 00 | 0 00 | 34 00 | 38 | 1 12 | 0. |

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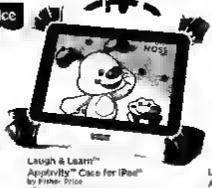

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# Windows Printer Test Page

Congratulations!

If you can read this information, you have correctly installed your HP Officejet 4300 Series on MICHAEL-PC

The information below describes your printer driver and port settings

| | |
|---|---|
| Submitted Time | 5:21:04 PM 10/26/2009 |
| Computer name | MICHAEL-PC |
| Printer name | HP Officejet 4300 Series |
| Printer Model | HP Officejet 4300 Series |
| Color support | Yes |
| Port name(s) | USB001 |
| Data format | RAW |
| Share name | |
| Location | |
| Comment | |
| Driver name | UNIDRV.DLL |
| Data file | HPO4300T.GPD |
| Config file | UNIDRVUI.DLL |
| Help file | UNIDRV.HLP |
| Driver version | 6.00 |
| Environment | Windows NT x86 |
| Monitor | LIDIL hpzllwm7 |

Additional files used by this driver

```
C:\Windows\system32\spool\DRIVERS\W32X86\3\HPZEVWM7.DLL          (61.053.41.07)
C:\Windows\system32\spool\DRIVERS\W32X86\3\HPZSTWM7.DLL          (61.053.41.07)
C:\Windows\system32\spool\DRIVERS\W32X86\3\HPZUTWM7.DLL          (61.053.41.07)
C:\Windows\system32\spool\DRIVERS\W32X86\3\HPZJRWM7.DLL          (61.053.41.07)
C:\Windows\system32\spool\DRIVERS\W32X86\3\HPZLAWM7.DLL          (61.053.41.00)
C:\Windows\system32\spool\DRIVERS\W32X86\3\HPZSSWM7.DLL          (61.053.41.07)
C:\Windows\system32\spool\DRIVERS\W32X86\3\HPZ3CWM7.ENE
C:\Windows\system32\spool\DRIVERS\W32X86\3\HPZSMWM7.CPM
C:\Windows\system32\spool\DRIVERS\W32X86\3\HPZ3MWM7.GPD
C:\Windows\system32\spool\DRIVERS\W32X86\3\HPO43OOT.XML
C:\Windows\system32\spool\DRIVERS\W32X86\3\HPZSCWM7.OTF
C:\Windows\system32\spool\DRIVERS\W32X86\3\HPFRES50.DLL          (A.04.05.000)
C:\Windows\system32\spool\DRIVERS\W32X86\3\HPFIME50.DLL          (A.05.01.000)
C:\Windows\system32\spool\DRIVERS\W32X86\3\HPFIGLHN.DLL          (A.01.06.007)
C:\Windows\system32\spool\DRIVERS\W32X86\3\HPZPMWM7.DLL          (61.053.41.07)
C:\Windows\system32\spool\DRIVERS\W32X86\3\HPZLEWM7.DLL          (61.053.41.07)
C:\Windows\system32\spool\DRIVERS\W32X86\3\UNIRES.DLL  (6.1.7600.16385
(win7_rtm.090713-1255))
C:\Windows\system32\spool\DRIVERS\W32X86\3\STDNAMES.GPD
C:\Windows\system32\spool\DRIVERS\W32X86\3\STDDTYPE.GDL
C:\Windows\system32\spool\DRIVERS\W32X86\3\STDSCHEM.GDL
C:\Windows\system32\spool\DRIVERS\W32X86\3\STDSCHMX.GDL
```

This is the end of the printer test page.

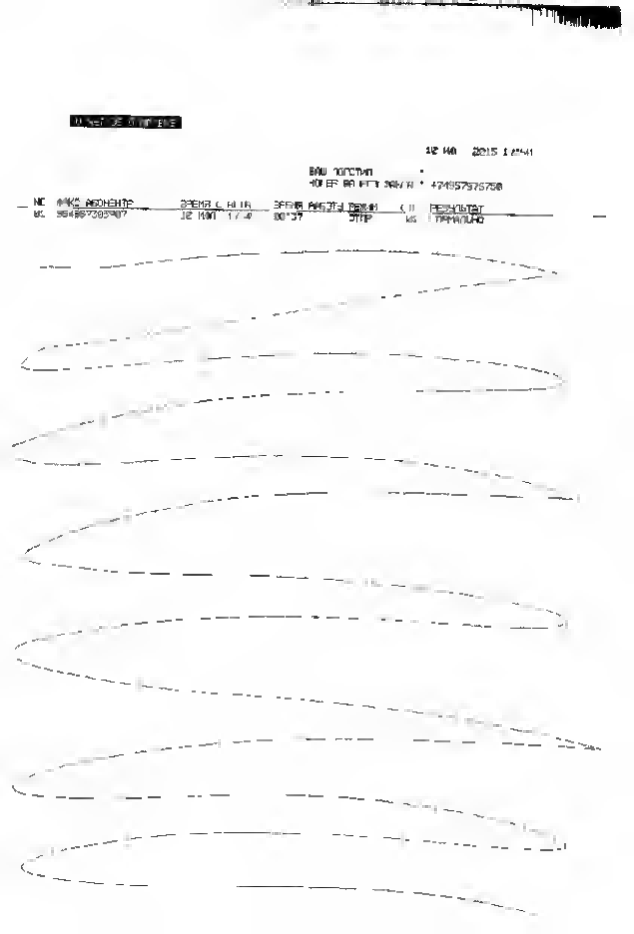
******** *ECRWSS**C-010
RESIDENT 00430
11308 PRESWICK BLVD
EDEN PRAIRIE MN 55344-4410

[redacted]

12 ΜΑ 2015 1:47:41

ΒΑΦ ΧΡΙΣΤΙΑΝ
40 ΕΡ ΒΑ ΑΓΓ ΒΑΛΛΑ 4748575757581

| ΝΟ | ΑΜΚΣ ΑΕΟΝΕΝΤΡ | ΣΡΕΜΑ ( ΚΑΙΙΑ | ΣΡΡΑΒ ΑΕΟΣΤΑ ΒΕΜΑ | ( ΙΙ | ΡΕΣΙΟΝΤΑΤ |
|---|---|---|---|---|---|
| ΜΣ | 9648973031907 | 12 ΜΑΙ 17:40 | 00'37 | ΣΤΙΡ ΜΣ | ΠΡΜΑΙΛΑΟ |



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Testing Outgoing faxing

2075

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2:35
2:42

Page 3

| Q |
|---|
| +4 |
| +3 |
| +2 |
| +1 |
| 0 |
| -1 |
| -2 |
| -3 |
| -4 |

| R | S | T | U |
|---|---|---|---|
| +2 | +2 | +2 | +2 |
| +1 | +1 | +1 | +1 |
| 0 | 0 | 0 | 0 |
| -1 | -1 | -1 | -1 |
| -2 | -2 | -2 | -2 |

| V | W | X | Y |
|---|---|---|---|
| +2 | +2 | +2 | +2 |
| +1 | +1 | +1 | +1 |
| 0 | 0 | 0 | 0 |
| -1 | -1 | -1 | -1 |
| -2 | -2 | -2 | -2 |

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# 2015 Mandatory Service Qualification for HP Desktops, Notebooks & Workstations

**DATE:** January 9, 2015

**REGION:** United States & Canada

**AUDIENCE:** ServiceOne Delivery Partners, Warranty Service Partners, Non-Authorized Service Providers (Non-ASPs), PPS Parts Providers, OEM Service Providers and Self-Maintainers

## Call to Action

HP is pleased to announce a new PSAM service qualification available only to HP Authorized service providers. All HP Service providers participating HP commercial desktop, notebook and workstation programs must achieve the new credential prior to July 15, 2015

The new service qualification credential is available on The Learning Center and can be accessed by using the following: HP Commercial Desktops, Workstations and Notebooks Service Qualification Windows 8.0 / 2012 (64 bit, Slipstream)

## Overview

The Web- based Training (WBT) new 8hour course Servicing HP Commercial Desktops, Workstations, and Notebooks for Onsite Technicians has been updated to include new HP products, technologies, and service procedures since the last release of Courseware in March 2014.

To earn the new qualification, students must successfully complete the Web- based Training (WBT) course that includes an embedded exam. The five hour WBT is on The Learning Center and is free of charge.

Existing Technicians holding the HP Commercial Desktops, Workstations and Notebooks Service Qualification (Release 2.0 / 2012) will be able to review the **What's New** section, at the course or directly the new or updated information and take the new examination at the end of the course to achieve the Service Qualification.
Note that the exam will include some questions from the previous release and many new questions, but the number score has not changed, and the exam are 80% Statements and completion of the course and exam will now provide a certificate. No classroom attendance is required for the Service Qualification.

As a reminder the Expertise "Desktops, Workstations and Notebooks (2014)" certification is not required for service qualification. AIS Certificates and Premier Plus are also exempt, are NOT required.
Service qualification is the credential required for HP Servicers and other authorized service providers. The qualification training is specific to the skills and knowledge necessary for HP authorized service providers.

brother

MFC-L2750DWXL / MFC-L2750DW / MFC-L2730DW / HL-L2395DW

# Quick Setup Guide

## Unpack the machine and check th

Drum Unit and Toner Cartridge

Toner Cartridge Repl
(For MFC-L2750DWXL
Use the toner cartridge that is pr
drum unit first.

Telephone Line Cord
(For MFC models)

Brother Installation Disc

Quick Setup Gui
Reference Guic
Product Safety Gi

## 1 Remove the packing materials and install the dru

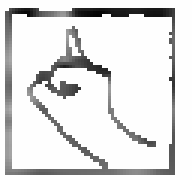
Remove

## 2 Load paper in the paper tray

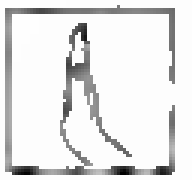
Adjust the pape
guides

**Appendix A Chart of Vowel Hand Signals** (See Guy Webb. Used by permission.)

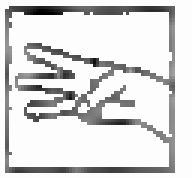
= o͞o (soon)


= ee (see)

= o͝o (stood)


= ih (sit)

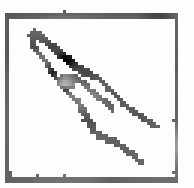
= ə (suspend)


= eh (send)

= er (sir)

= æ (sat)

= oh (soul)


= uh (sun)

= aw (soft)

= ah (stop)

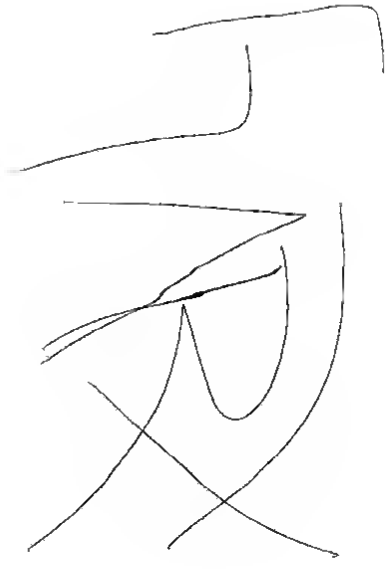
---

See Guy B. Webb, ed. *Up Front: Becoming the Complete Choral Conductor* (Boston: E. C. Schirmer Music Company, Inc., 1993).

[a] See Clifton Ware, *Basics of Vocal Pedagogy: The Foundations and Process of Singing* (Boston: McGraw Hill, 1997) 166.

Terrell 11:00 ✓

B Pugh



BREW BREES MVP – THIS IS THE TOP OF THE PAGE HERE  YOU ARE AT THE TOP NOW DOES IT FEEL?

# FAX #1

SHAN DOE: AUTODETECT

ORIGINAL OR ENTATION GHOICE: 01

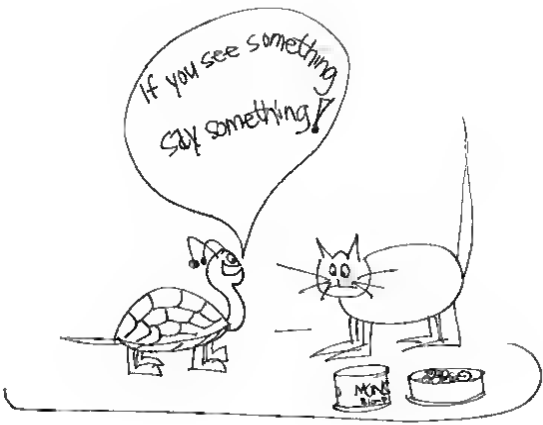
NO BEER AND NO TV MAKE HOMER SOMETHING SOMETHING... GO CRAZY?

DON'T MIND IF I DO

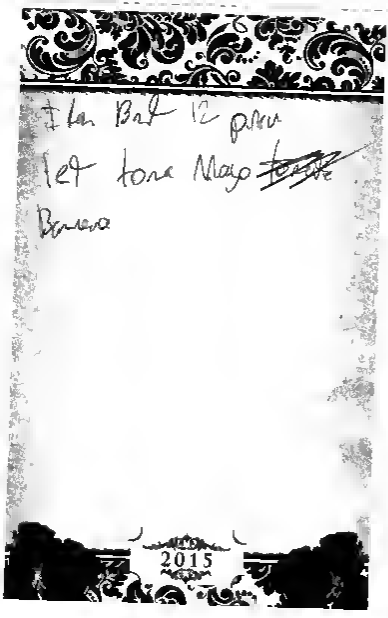
WAHHHH!! I OOOOHHH!! I AAHAANTANTHEAAALALALILALALALABALBALBALBALBALBALBALAI

WOWOWOWAOALAAAHAAHHHHHHAHHHH! I WOOW OOOWOOW WOOWEWOWOWOO!!!

HOHAAA




©2010 "It's a Rave!"
Productions Ltd


Ilan Bat 12 pm
left tone Map
Bonus
2015

TEST
CHAD

TE #4407144800

Recipient Information

To: Ellen Isenhour
Company Jnd Transport
Fax # 4402388237

faxZERO.com
send a fax for free

Sender Information

From Ellen Isenhour
Email address ellen.isenhour4@gmail.com (from 174.130.703.57)
Phone # 4407144800
Sent on Monday, September 29 2014 at 11:45 AM EDT

HELLO

TES
D

STAMBER REUBENS THOMAS KINNEY
Attorneys at Law

1 City Boulevard West Suite 1400
Orange, CA 92868
(o) 714.543.9090 | (f) 714.543.9190

# Fax Cover Sheet

Date 11/21/2018 10:33:22 AM
Subject test Orange

Message

CECILIA LOPEZ Support Services
Supervisor

Stamber Reubens Thomas Kinney
1 City Boulevard West, Suite 1400
Orange, California 92868
(o) 714.543.9090 (f) 714.543.9190 | srtklaw.com
California's Leading Business Transaction Defense Firm
Since 1979

Please note my new email address

This electronic mail is business only for the use of the individual or entity to whom it is addressed, and business information that may be subject to the attorney-client privilege or the attorney work product privilege or otherwise confidential.
Any circumstances, copying or use of this electronic mail by or to anyone other than the designated and intended recipient(s) is unauthorized and strictly prohibited. If you have received this communication in error,
please notify me immediately by return electronic mail and delete the original message from your system immediately. Thank you.

This electronic, inadvertent, contains confidential information from Stamber Reubens Thomas Kinney. This information is electronic solely for use by the individual or entity named as recipient above. If you are not the intended recipient, any disclosure, copying, distribution or use of the contents of it is forbidden is prohibited. Whether or this transmission is in no way interpreted as a waiver of any privilege. If you have received it in transmission in error, please notify immediately so that we may retrieve the transmission at no cost to you. Thank you.

Test

VILLAGE

MS

FAX

TEST 1

Look
beyond
what
you see
...

Dear Jeff,
This a test fax from you.
Sincerely,
Me

ACTIVITY REPORT

TIME 01/28/2016 10:33
NAME
FAX
TEL
USER # XROMAJ542055

| NO | DATE | TIME | FAX NO /NAME | DURATION | PAGE(S) | RESULT | COMMENT |
|---|---|---|---|---|---|---|---|
| #455 | 01/11 | 10:14 | 8013402139 | 02:31 | 08 | OK | TX ECM |
| #456 | 01/11 | 20:48 | 8774423522 | 57 | 04 | OK | TX ECM |
| #457 | 01/12 | 14:36 | 3172343792 | 00 | 00 | BUSY | TX |
| #458 | 01/12 | 14:37 | 3172343792 | 00 | 00 | BUSY | TX |
| #459 | 01/12 | 14:47 | 3172343792 | 00 | 00 | BUSY | TX |
| #478 | 01/13 | 12:01 | 15815830151 | 51 | 02 | OK | TX |
| 471 | 01/14 | 12:43 | 7654402760 | 00 | 00 | BUSY | TX |
| #472 | 01/14 | 12:44 | 17654402760 | 04:05 | 08 | OK | TX ECM |
| #473 | 01/15 | 12:28 | 16192348678 | 47 | 08 | NG | TX ECM |
| #474 | 01/15 | 12:22 | 16192348678 | 40 | 01 | OK | TX ECM |
| #475 | 01/15 | 13:00 | 15815831145 | 28 | 01 | OK | TX |
| #476 | 01/15 | 13:09 | 16192348678 | 01:03 | 01 | OK | TX ECM |
| #477 | 01/15 | 13:42 | 16192348678 | 43 | 01 | OK | TX ECM |
| | 01/28 | 10:53 | 9813755699 | 24 | 01 | OK | RX ECM |
| #478 | 01/21 | 14:52 | 19172330439 | 99:38 | 02 | OK | TX ECM |
| #479 | 01/21 | 15:10 | 16823641211 | 01:10 | 02 | OK | TX ECM |
| | 01/23 | 08:23 | 803 772 9418 | 01:05 | 02 | OK | RX |
| | 01/23 | 01:28 | 803 772 9418 | 01:05 | 02 | OK | RX |

BUSY BUSY/NO RESPONSE
NG POOR LINE CONDITION / OUT OF MEMORY
OK COMPLETE
POL POLLING
RET RETRIEVAL

NORTHWEST ARKANSAS PATHOLOGY ASSOCIATES, P.A.
3309 EAST LONGVIEW STREET FAYETTEVILLE, AR. 72703 (479) 442-0344

**SOUTHERN SURGICAL(SN) Report**

| Patient Information | Physician Information | Accession # 21030 |
|---|---|---|
| **Name:** Benjamin Andersen<br>**Age:** 54 **Sex:** Male<br>**DOB:** 10/28/1962<br>**Medical Record#:** 9191<br>**Encounter#:** 9191919 | **Ordering:** Kay Knapp<br>15440 Laguna Canyon Rd, Suite 260, Irvine 92618 | **Date Collected:** N/A<br>**Date Received:** 10/17/2016, 08:30:00 AM<br>**Date Reported:** 10/17/2016, 12:36:45 PM |

**CC:**

**CLINICAL HISTORY:**
A N/A

**FINAL DIAGNOSIS:**
A N/A

**COMMENT**
A N/A

**MICROSCOPIC DESCRIPTION:**
A N/A

**GROSS DESCRIPTION:**
A N/A

**INTRAOPERATIVE/INTRAPROCEDURAL EVALUATION**
A N/A

**SPECIMEN SOURCE:**
A Adrenals

Electronically Signed Out
Haix Administrator 10/17/2016 05:59:45 PM

**CPT:**
A 88304
609 W. Maple Springdale,AR 72764 **CLIA** 0401051967

# Test

# Az40ss

H5

Fax Test

MJ

(2)

(888) 877-1655

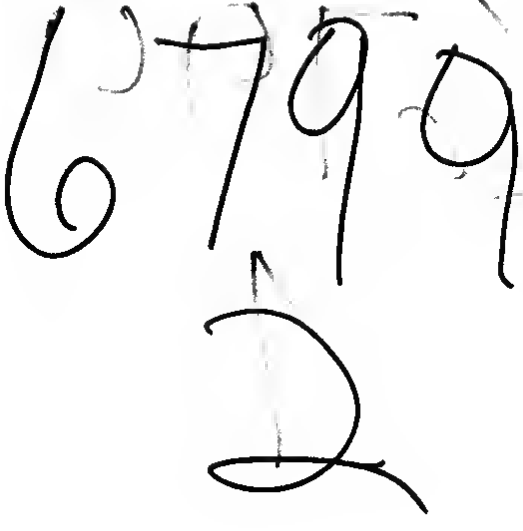
TEST FAX FOR MY PROJECT ☺

TEST FAX FOR MY PROJECT ☺

TEST FAX FOR MY PROJECT ☺

TEST FAX FOR MY PROJECT ☺

TEST FAX FOR MY PROJECT ☺



DELL™

# Fax Setup Help

| Fax Setup Help | For additional information, see your User's Guide found on your Drivers and Utilities CD or at support.dell.com.<br><br>To complete fax setup later, use the printer's Operator panel to navigate to Setup→ Fax Setup→ Setup Wizard. | Manual ID<br><br>Enter a Fax header using your printer's Operator Panel numerical keypad<br><br>Tip: Enter your Fax number | Receive Mode<br><br>Based on how you receive a Fax call, select either Fax Tel, or Ans/Fax Mode<br><br>Tip: Select Fax Mode (Has a direct connection to a wall outlet) | Rings to Answer<br><br>Set the number of rings before your printer answers a Fax call<br><br>Tip: 1 | Verify that the Test Text and Dial Tone Test are successful<br><br>Ensure that the Ready screen appears |
|---|---|---|---|---|---|
| Hulp bij het installeren van de Fax | Raadpleeg uw gebruikershandleiding voor meer informatie. U vindt deze op de cdrom | Apparaat-id<br><br>Stel een fax-id op met het numerieke toetsenbord voor het bedieningspaneel van uw printer<br><br>Tip: typ uw faxnummer | Ontvangstmodus<br><br>Selecteer de modus Fax Tel of Ant/Fax, al naar gelang de manier waarop u faxen ontvangt<br><br>Tip: selecteer de modus Fax [voor een rechtstreekse aansluiting op een wandcontact] | Aantal keren overgaan voor antwoord<br><br>Stel het aantal keren in dat de telefoon moet overgaan voordat uw printer een faxgesprek beantwoordt<br><br>Tip: 1 | Controleer of het testbericht en de testtoon met goed gevolg verlopen<br><br>Controleer of het scherm Gereed (gereed) wordt weergegeven. |
| Aide à la configuration de fax | Pour de plus amples informations, reportez-vous au Guide d'utilisation disponible sur le CD Drivers and Utilities (Pilotes et utilitaires) ou à l'adresse support.dell.com.<br><br>Pour passer vers la configuration ultérieurement, allez au Setup (Configuration) → Fax Setup→ Setup Wizard (Assistant de configuration) en vous servant du panneau opérateur de l'imprimante. | ID machine<br><br>Spécifiez un en-tête de fax à l'aide du pavé numérique du panneau opérateur de l'imprimante<br><br>Conseil : saisissez votre numéro de fax | Mode réception<br><br>En fonction de votre mode de réception de fax sélectionnez le mode Fax, Tél ou Ans/Fax (Répondeur).<br><br>Conseil : sélectionnez le mode Fax (en cas de connexion directe à votre prise murale) | Sonnerie de sonnettes<br><br>Définissez le nombre de sonneries de l'imprimante avant qu'elle ne réponde à un appel Fax<br><br>Conseil : 1 | Effectuez le test de ligne et le test de tonalité<br><br>Vérifiez Ready (Prêt) dans apparaître |
| Fax Setup Hilfe | Weitere Informationen finden Sie in der Bedienungsanleitung auf der CD Treiber und Dienstprogramme oder unter support.dell.com.<br><br>Um die Fax Setup später fertigzustellen, wechseln Sie die Bedienungskonsole des Druckers, um in Setup→ Fax Setup→ Setup Wizard zu navigieren | Gerätekennung<br><br>Geben Sie mithilfe der Numerischtastatur auf der Bedienungskonsole Ihres Druckers eine Faxkennung ein<br><br>Tipp: Geben Sie Ihre Faxnummer ein | Empfangsmodus<br><br>Wählen Sie aufgrund Ihres Faxempfangs Fax Tel oder Ant./Fax-Modus.<br><br>Tipp: Wählen Sie den Fax-Modus (für eine direkte Verbindung an einen Wandanschluss) | Klingeln für Antwort<br><br>Stellen Sie die Anzahl der Klingeltöne ein nach denen Ihr Drucker das Faxanruf beantwortet.<br><br>Tipp: 1 | Prüfen Sie ob die Leistungstest und Wählfrequenz erfolgreich sind<br><br>Stellen Sie sicher, dass der Bildschirm Bereit" erscheint |

They say each day is a gift.
Where can I return Mondays?

GE
Security

# IS-TS-1000 Touch Screen Installation Sheet

## Description

The IS-TS-1000 Touch Screen provides some of the features of a home control system, security, lighting control, thermostat controls, and web based interactive content. The touch screen features a 7-inch LCD screen displaying 800 x 480 pixels and 262k color spectrum to guide every high resolution images for optimum viewing.

## Installation

The touch screen can be mounted on a wall or a table top stand.

To mount the touch screen on a wall:

1. Remove the mounting bracket from the back of the touch screen.
2. Use the bracket as a template to locate mounting holes on the wall.

   Make sure the bracket is level and the "TOP" indication on the bracket is oriented correctly.
3. Use appropriate screws or wall anchors to secure the bracket to the wall.
4. Connect the transformer provided with the touch screen to the "DC IN" plug on the back of the Touch Screen.
5. Run the transformer wire through the center of the slots on the back of the touch screen and plug the transformer into a nonswitched outlet.
6. Align the touch screen on the mounting bracket, align the mounting holes in the mounting bracket with the slots on the back of the touch screen.

To mount the touch screen on a tabletop stand:

1. Remove the mounting bracket from the back of the touch screen.
2. Connect the transformer provided with the touch screen to the "DC IN" plug on the back of the touch screen.
3. Run the transformer wire through the center of the slots on the back of the touch screen and plug the transformer into a non switched outlet.
4. Attach the touch screen on the stand, aligning the mounting tabs on the stand mounting bracket with the slots on the back of the touch screen.

Note: Once figure the touch screen with your security system, please refer to the documentation provided by your call to service.

## Basic operation

The Home button is built into the touch screen's frame. You can touch it to go back to the Home screen from anywhere in the touch screen interface.

If your security panel is connected for emergency buttons, the bottom right hand corner of the Home screen Touch the feature to display the water shut off, Fire, Police, and Fire. Touch and hold the appropriate button for two seconds to send an alarm. The Panic and Police buttons provide audible feedback to confirm once before sending the alarm. Fire requires two. The Fire button sends an immediate alarm without any delay.

### System Icon

The system icon appears on the Home screen, and is a miniature version of it appears on most other screens. It is a graphical representation of the overall status of the system. In addition to the icon, text on either side of the icon provides additional details.

The System Icon's color indicates status:

- Green: The security panel is disarmed.
- Red: Red, white check: The security panel is armed, either all sensors or doors and windows only.
- Red: Red, black stripes and a red emotion point: Alarm at Panel. View Immediate Attention.
- Gray: The security panel or gateway is offline.

Smaller symbols appear on the green and red system icons when there is more information to relay:

- Red diamond: Appears when one or more sensors in the security panel.
- Yellow circle: Appears when doors and windows are open. A number appears at the yellow circle to indicate the number of open sensors.
- Red diamond and yellow circle: Both problem with the sensors and an open door or window.
- Wrench: Some errors and has alerts. Version is outdated.

© 2009 GE Security, Inc.

you + hp

FaxBack System Test

Thank you for choosing hp

## Other useful hp web sites

**www.hp.com/regnier**
Use this web address to register your [illegible]

**www.hp.com/support**
Use this web address to obtain valid [illegible] support for your product

**www.hpshopping.com**
Use this web address to order supplies and accessories for your HP product

## Help us help you

We're interested in your feedback on this fax evaluation system. Send your comments to

faxfeedback@hp.com

hp
invent

©2000 Hewlett-Packard Company LP
www.hp.com

TEST

277

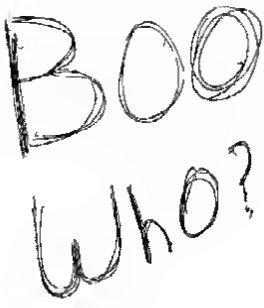
TEST

**Marriott Wardman Park Hotel Rooms and Levels**

| Room | Level |
|---|---|
| Balcony A/B | Mezzanine |
| Buchanan | Mezzanine |
| Cleveland 1/2 | Mezzanine |
| Coolidge | Mezzanine |
| Delaware A/B | Lobby |
| Harding | Mezzanine |
| Hoover | Mezzanine |
| Jackson | Mezzanine |
| Lincoln 1–6 | Exhibit |
| Madison A/B | Mezzanine |
| Maryland A–C | Lobby |
| McKinley | Mezzanine |
| Marriott Ballroom | Lobby |
| Taft | Mezzanine |
| Taylor | Mezzanine |
| Thurgood Marshall Ballroom | Mezzanine |
| Truman | Mezzanine |
| Tyler | Mezzanine |
| Virginia A–C | Lobby |
| Washington 1–6 | Exhibit |
| Wilson A–C | Mezzanine |

**Omni Shoreham Hotel Rooms, Levels, and Promenades**

| Room | Level | Promenade |
|---|---|---|
| Ambassador Room | Lower | West |
| Blue Room | Lower | East |
| Blue Room Prefunction | Lower | East |
| Cabinet Room | Lobby | West |
| Capitol Room | Lobby | East |
| Congressional Room | Lobby | West |
| Diplomat Room | Lower | West |
| Embassy Room | Lobby | East |
| Empire Room | Lower | West |
| Executive Room | Lobby | West |
| Forum Room | Lobby | West |
| Hampton Room | Lobby | East |
| Fallad an Room | Lower | West |
| Senate Room | Lobby | West |


BOO
Who?

1817 East Avenue "Q" Unit A-15
(at 20th Street East)
Palmdale, CA 93550

# Meeting Schedule

No persons under the age of 18 are allowed to attend Closed Smoking Meetings.
(OPEN meetings are open to Family, Friends and all interested parties)
All meetings are 1 ½ hours long, unless otherwise noted.

## MONDAY

| | | | |
|---|---|---|---|
| Closed | (Smoking) | 09:30 am | Participation |
| OPEN | (No Smoking) | 12:00 noon | 12 x 12 Book Study |
| OPEN | (No Smoking) | 06:00 pm | Participation |
| Closed | (Smoking) | 08:00 pm | Participation |

## TUESDAY

| | | | |
|---|---|---|---|
| Closed | (Smoking) | 09:30 am | Participation |
| OPEN | (No Smoking) | 12:00 noon | Big Book Study |
| OPEN | (No Smoking) | 08:00 pm | Participation |
| Closed | (Smoking) | 05:00 pm | Participation |

## WEDNESDAY

| | | | |
|---|---|---|---|
| OPEN | (No Smoking) | 09:30 am | Participation (Birthday Meeting) |
| OPEN | (No Smoking) | 12:00 noon | Participation |
| OPEN | (No Smoking) | 06:00 pm | Big Book Study |
| Closed | (Smoking) | 08:00 pm | Men's Stag (*Men Only*) |

## THURSDAY

| | | | |
|---|---|---|---|
| Closed | (Smoking) | 09:30 am | Participation |
| OPEN | (No Smoking) | 12:00 noon | Participation |
| OPEN | (No Smoking) | 08:00 pm | Participation |
| Closed | (Smoking) | 08:00 pm | The Gong Show Podium |

## FRIDAY

| | | | |
|---|---|---|---|
| Closed | (Smoking) | 09:30 am | Participation |
| OPEN | (No Smoking) | 12:00 noon | Participation |
| OPEN | (No Smoking) | 08:00 pm | 12 x 12 Book Study |
| Closed | (Smoking) | 08:00 pm | Topic Discussion |
| Closed | (Smoking) | 10:00 pm | Candle Light |

## SATURDAY

| | | | |
|---|---|---|---|
| Closed | (Smoking) | 09:30 am | Participation |
| OPEN | (No Smoking) | 12:00 noon | Participation |
| OPEN | (No Smoking) | 02:30 pm | Young Person's Meeting |
| Closed | (Smoking) | 04:30 pm | Participation |
| OPEN | (No Smoking) | 07:00 pm | Guest speaker (*Birthday Meeting*) |
| Closed | (Smoking) | 10:00 pm | Candle Light |

## SUNDAY

| | | | |
|---|---|---|---|
| Closed | (Smoking) | 08:00 am | Participation |
| Closed | (Smoking) | 01:00 pm | Daily Reflections |
| OPEN | (No Smoking) | 03:00 pm | Newcomers |
| Closed | (No Smoking) | 05:00 pm | Women's Meeting (*Women only*) |
| Closed | (Smoking) | 07:00 pm | Podium |

Antelope Valley Central Office (661) 945-5757 or http://www.avcentraloffice.org
Revised 09/25/07

Scan test abcdefghijklmnolprstuvwxyz

Scan test abcdefghijklmnolprstuvwxyz

Scan test abcdefghijklmnolprstuvwxyz

Scan test abcdefghijklmnolprstuvwxyz

Scan test abcdefghijklmnolprstuvwxyz

Scan test abcdefgh jklmnolprsl uvwxyz

# Fax Cover Sheet

**To:** **From:**

**Fax:**

**Phone:** **Date:**

**Re:**

| | |
|---|---|
| General Supplies | Folders with pockets<br>Loose leaf paper lined, college rule<br>Pens- blue black & red<br>Pencils<br>Colored pencils<br>Highlighters<br>Colored markers<br>Glue sticks<br>Erasers<br>2GB USB thumb drive<br>Scissors<br>3x5 Notebook cards<br>Tissues- donation to classroom if possible |

| | |
|---|---|
| World Language | Composition Notebook (100 pages)<br>Plastic 2-pocket folder with 3 prongs<br>1 roll of shipping or duct tape<br>Headset w/microphone (standard 3.5mm headphone jack) *(Optional)*<br>Colored pens *(optional)* |
| General Supplies | Loose leaf paper (wide rule 1 pack per binder)<br>Graph Paper<br>Pens- blue, black & red<br>Pencils<br>Highlighters- at least 2 colors<br>Glue Sticks<br>Erasers<br>2GB USB thumb drive<br>Scissors<br>Tissues- donation to classroom if possible |

**Teachers may ask for specific supplies for their class during the first week of school.**

****Algebra, Geometry- Students will have the option to borrow a TI-83 graphing calculator from Frost for use at home, purchase is suggested but not a requirement. Class sets are available in all math classrooms for use during the school day**

**If students take an upper level math class at Woodson High School such as BC Calculus or Multivariable Calculus they will most likely need a TI-89. For other math classes the TI-84 will work.**

**Recipient Information**

To AJ USA
Fax # 8584528890

fax ZERO .com
Sending fax for free

**Sender Information**

From AJ USA
email address ANGELIQUE81_18@YAHOO.COM (from 38.180.248.34)
Phone # 8584528900
Sent on Wednesday, June 17 2015 at 2:30 PM EDT

TEST TEXT

[illegible] using the [illegible] service is subject to [illegible] Use of this service for sending [illegible] is prohibited. You may only use this service for sending [illegible] to recipients that [illegible] to receive them. [illegible] may terminate your use of the service if [illegible] violate these terms.

THE MOST TRUSTED NAME IN
CNN
VERY FAKE NEWS

TEST FAX FROM MATT P @ Aspen Equipment

Please let me know if you received this fax okay. My email address is: mpoladian@aspeneq.com

--Thank you

This fax was sent with GFI FAXmaker fax server. For more information, visit: http://www.gfi.com

test
2

SBA-BWR C/O METRO T&C

(888)862-0943

**FORWARD AIR** ETD 05/10/13 **STATION** LAS 877-247 1879

**MAWB**

| HAWB | SERVICE | MUST DELIVER BY | NATURE OF GOODS | DEST | AREA | PIECES | WEIGHT | DEC VALUE |
|---|---|---|---|---|---|---|---|---|
| W580556 | ECONOMY 3-5 BUSINESS DAY | 05/21/13 | Test Product2 | 10 | E | 10 | 4.00 | 0.00 |
| W580556 | ECONOMY 3-5 BUSINESS DAY | 05/21/13 | Test Product3 | 11 | E | 11 | 51.00 | 0.00 |
| W580556 | ECONOMY 3-5 BUSINESS DAY | 05/21/13 | Test Product4 | 10 | E | 10 | 51.00 | 0.00 |

**SHIPPER** 875487 Dunson

100 GOAT ROAD,

plainview NY 11803,

null

**CONSIGNEE** Phillips Corporation

100 GOAT ROAD1, Attn2,

plainview NY 11803,

516-555-1217

Must Be Buyer Rip Later Than 05/21

**CHARGES**

**POD**

***** PLEASE FAX BACK TO (888)210-8180 *****

| DESTINATION | SHIPMENTS | 1 | SBA-BWR C/O METRO T&C | 1 | 122 |
|---|---|---|---|---|---|

Posted about a month ago on 2017-07-07 1:20pm

Contact information:

# $173000 / 3br - 1576ft² - Beautiful Millcreek Home - Open House Sunday 8/13 1-3pm (Belle Valley)

Image 1 of 20

4817 Amy Ave

3BR / 1.5Ba 1576ft² available now

house
w/d in unit
attached garage

1-855-330-1239

What a great family home this is! Many great features including a newer roof (2009), stainless steel kitchen appliances stamped concrete patio in the back yard great layout and clean as can be.

This is a wonderful family home set in a quaint neighborhood in a well-reviewed school district With a street that has only one entrance/exit point, there is minimal traffic and the neighborhood is very active as a result Many people going for walks, kids playing together, and friendly faces make this a very desirable place to be There is an open floor plan between the kitchen and living room, despite being a tri level home A second lower living room with a direct vent fireplace is great for colder nights and provides a comfy area for kids or to entertain A spacious finished laundry room with lots of storage is very convenient and even the unfinished storage basement area recently had it's walls and floors painted creating a bright space that is more than usable This is a perfect home for a family!

QR Code Link to This Post

CRIMINAL
CNN
NEWS NETWORK

# OPEN HOUSE SIGN-IN

| name | email | phone | purpose |
| --- | --- | --- | --- |
| 1-855-330-1239 | | | selling ☐ buying ☐ looking ☐ other |
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Test Fax

2739 from

Teri

LOWE'S
0107 - DAVENPORT, IA

xmono$ (https://lcsrv.mylowesalife.com wlc/loginWithUID) https://lcsrv.mylowesalife.com
/homepage/login ) Workspace
Single Sign-On
Employee ID Password SIGN IN
Forgot Password? (https://lcsrv.mylowesalife.com/ess/mp/dispatch/ess/index.jsp?task.tag=LowesForgotenPassword#case) | Set Security Questions (https://lcsrv.mylowesalife.com/ess/SpiService/Create/e.sblainjservice.html) | Help (https://lcsrv.mylowesalife.com
/ess/mp/commonTasks-en_US#/web/Web15c845e66ede_dtds_$$ee_shell/%8a7c8/page/WorkspaceController?_adfctg=*-gNm%0(Help)

This cust **ke** s pa on ned dur ng weeks 1 2, 3 and 11 Use the spaces provided for each exercise to record the number of reps performed and, when using dumbbells the weight lifted If using a band indicate its color along with the number of reps performed. This is a "repeat" workout, so for each exercise use the top line for the first round and the bottom line for the second round

*R = REPS* *W = WEIGHT*

| | WEEK 1 | WEEK 2 | WEEK 3 | WEEK 7 | WEEK 11 |
|---|---|---|---|---|---|
| 01 Diamond Push-Ups | R 15 | R 10 | R 12 | R 18 | R 15 |
| | R | R 6 | R 8 | R 12 | R 12 |
| 02 Wide Front Pull-Ups | R 12a | R 10a | R 12a | R 15a | R 10a |
| | R | R 8a | R 9a | R 10a | R 10a |
| 03 Military Push-Ups | R 10 | R 8 | R 9 | R 14 | R 12 |
| | R | R 4 | R 6 | R 10 | R 8 |
| 04 Reverse Grip Chin-Ups | R 10a | R 8a | R 9a | R 12a | R 10a |
| | R | R 8a | R 8a | R 10a | R 10a |
| 05 Wide Fly Push-Ups | R 9 | R 7 | R 9 | R 14 | R 15 |
| | R | R 5 | R 7 | R 12 | R 12 |
| 06 Closed Grip Overhand Pull-Ups | R 8a | R 6a | R 9a | R 10a | R 10a |
| | R | R 6a | R 7a | R 9a | R 8a |
| 07 Decline Push-Ups | R 4 | R 5 | R 5 | R 10 | R 14 |
| | R | R 2 | R 4 | R 9 | R 7 |
| 08 Heavy Rows | R 10 W 25 | R 12 W 25 | R 12 W 25 | R 12 W 30 | R 12 W 30 |
| | R W | R 12 W 25 | R 15 W 25 | R 12 W 30 | R 12 W 30 |
| 09 Diamond Push Ups | R 7k | R 5k | R 6k | R 10k | R 5 3k |
| | R | R 5K | R 7k | R 12k | R 10k |
| 10 Lawnmowers | R 10 W 25 | R 12 W 25 | R 15 W 25 | R 15 W 30 | R 15 W 30 |
| | R W | R 15 W 25 | R 15 W 25 | R 12 W 30 | R 12 W 30 |
| 11 Dive-Bomber Push-Ups | R 4 | R 5 | R 5 | R 8 | R 7 |
| | R | R | R 4 | R | R |
| 12 Back Ups | R 10 W 15 | R 10 W 15 | R 12 W 15 | R 12 W 20 | R 10 W 20 |
| | R W | R 12 W 15 | R 12 W 15 | R 12 W 20 | R |

# Windows Printer Test Page

Congratulations!

If you can read this information, you have correctly installed your EPSON PC FAX driver on BUCKTAYLOR-HP

The information below describes your printer driver and port settings

Submitted Time: 11/22/2011 4:42 PM
Computer Name: BUCKTAYLOR-HP
Printer Name: Artisan 830 Series - Network FAX
Printer Model: EPSON PC-FAX driver
Color Support: No
Port Name(s): EPSA598A ARTISAN 830
Data Format: NT EMF 1.003
Share Name:
Location:
Comment:
Driver Name: EFXGID9A.DLL
Data File: EFXUID9A.
Config File: EFXUID9A.DLL
Help File: EFXHID9A.CHM
Driver Version: 4.01
Environment: Windows x64
Default DataType: NT EMF 1.003

Additional files used by this driver:
C:\Windows\system32\spool\DRIVERS\x64\3\EFXNID9A.DLL (2, 0, 0, 10 built by WINDDK)
C:\Windows\system32\spool\DRIVERS\x64\3\EFXTJMMV.exe (2.0.0.10)
C:\Windows\system32\spool\DRIVERS\x64\3\EFXIJMMV.dll (2.0.0.10)
C:\Windows\system32\spool\DRIVERS\x64\3\FUCRVUTL.dll (2.0.0.10)
C:\Windows\system32\spool\DRIVERS\x64\3\FUPRNSYS.dll (2, 4, 3, 18)

This is the end of the printer test page.

TEST

FAX

MID

(1) 三十三才

Saturday January 12, 2013

To: Rod Reef
Fax: +1(000)-877 1055
Attn: Rod Reef
Subject: Booking Confirmation

| Reservation Confirmation |
|---|
| 20101E84-49FA-301 |
| Created 01/12/2013 06:36:36 GMT |

Dear Rod Reef,

We have received the following reservation for your property and are transmitting this Reservation Confirmat ion via facsimile. If you have any questions regarding this reservation, please contact our Reservation Support Team at Tel. 1 250 707 4587 or Email supp ort@insight.com.

Thank You,
INSight com

## GUEST INFO

It is your obligation to safeguard this fax and keep this guest's credit card information secure in accordance with your internal security procedures.

| Booked by: | Test Test | State: | test |
|---|---|---|---|
| Address: | test | Z p code | 1.2312313123 |
| City: | test | Country: | AEGFGfa |
| INSight Username: | | Telephone Number: | |

## BILLING INFORMATION

| Credit Card: | Visa | Expiry Date: | 201305 |
|---|---|---|---|
| Credit Number: | 4111111111111111 | CVC Code: | |

## ROOM DETAILS

| Number of Rooms: | 1 | Number of Nights: | 1 |
|---|---|---|---|
| Check In Date: | January 12, 2013 | Check Out Date: | January 13, 2013 |

**Room 1 Hotel Stall** — Adults 2 Children 0

| First Name: | test | Last Name: | test |
|---|---|---|---|

+ Included. Lorem ipsum dolor sit amet, consectetur adipisicing elit, sed do
Nul luc aded. Lorem ipsum dolor sit amet, consectetur adipisicing elit, sed do

| Room Details: | Date: | Jan 12 |
|---|---|---|
| | Rate: | $ 50.00 |

**Sub-Total** $50.00
**Tax (10%):** $ 5 **Total** $ 55.00

**Note** Rates Include Extra Person/Child Fees

**Cancellation Policy**
Lorem ipsum dolor sit amet, consectetu r adipisicing elit, sed do eiusmod tem por incididunt ut labore et dolore magna aliqua. Ut enim ad minim veniam, quis nostrud exercitation ullamco laboris nisi ut aliquip ex ea commodo consequat. Duis aute irure dolor in reprehenderit in voluptate velit esse cillum dolore eu fugiat nulla pariatur. Excepteur sint occaecat cupidatat non proident, sunt in culpa qui officia deserunt mollit anim id est laborum.

**Thanks for selecting INSight.com as your partner**

Thursday October 10, 2013

To: BHALU BEARINN HOTEL SUITS
Fax: +1(888)-877 1688
Attn: Ajesh Chandran
Subject: Cancellation Confirmation

| Cancellation Confirmation |
| --- |
| 4CS93528-1177-265 |
| Cradled 10/10/2013 09:22:26 GMT |

Dear Ajesh Chandran,

We have received the following reservation cancellation for your property and are transmitting this Cancellation Confirmation via facsimile. If you have any questions regarding this cancellation, please contact our Reservation Support Team at Tel: +1 (604) 508-4527 Fax. 415-504-7508 Skype: NNsight, or Email: support@nnsight.com.

Thank You.
NNsight com

ROOM DETAILS

| Number of Rooms: | | Number of Nights: | 4 |
| --- | --- | --- | --- |
| Check In Date | October 11 2014 | Check Out Date | October 15, 2014 |

Room 1 Pradun Suniyari Mendiratta — Adultes: 2 Children: 0

| First Name: | Sunil v | Last Name: | Sharma |
| --- | --- | --- | --- |

Pradhan is near Radha, Site into corn of Room & its good. Radha is really good hostess & plays many games. Th s room comes with King suite & have 2 bathrooms with bath robes
+ Included; testing testing testing testing testing testing testing testing testing
Not Inc uded; testing testing testing testing testing testing testing testing

| Room Details | Date. | October 11 | October 12 | October 13 | October 14 |
| --- | --- | --- | --- | --- | --- |
| | Rate- | $ 22.00 | $ 22.00 | $ 22.00 | $ 22.00 |

Sub-Total: $133.00
Tax (%) $ 0 = Total: $ 133.00

Notes: Rates include Extra Person/Cold Room

Cancellation Reason/Reason not given

Thanks for selecting NNsight.com as your partner

IGNORE

TEST FAX

IGNORE

Fax test

message

6/3/13

PK

Saturday February 09, 2013

| Reservation Confirmation |
| --- |
| 1EF79BF1-B85D-20B |
| Created: 02/09/2013 15:49:19 GMT |

Pax To: Blue Bear INN Hotel & Suites
Fax: +1(608)-877-1865
Attn: Ajesh Patel
Subject: Booking Confirmation

Dear Ajesh Patel,

We have received the following reservation for your property and are transmitting this Reservation Confirmed to via facsimile. If you have any questions regarding this reservation, please contact our Reservation Support Team at Tel. 1 250 707 4587 or Email support@insight.com.

Thank You,
INSight com

## GUEST INFO

It is your obligation to safeguard this fax and keep this guest's credit card information secure in accordance with your internal security procedures.

| Booked by: | Test Test | State: | dfhdf |
| --- | --- | --- | --- |
| Address: | adfsd | Zip code | 34234 |
| City: | adfsd | Country: | BAHAMAS |
| Email Address: | test@aol.com | Telephone Number: | 3434324234 |

## BILLING INFORMATION

| Credit Card: | Visa | Expiry Date: | 2013 1 |
| --- | --- | --- | --- |
| Credit Number: | 4111111111111111 | CVV Code: | 2 |

## ROOM DETAILS

| Number of Rooms: | 1 | Number of Nights: | 2 |
| --- | --- | --- | --- |
| Check In Date: | February 6 2013 | Check Out Date: | February 10 2013 |
| Total: | 199.8000 | | |

Room 1 Mumy Room Adults: 2 Children: 0

| First Name | asd | Last Name | asd |
| --- | --- | --- | --- |

This is mummy room, with mummy flavor This room is silent calm & facing towards Jungle In morning time you will see People holding the p Water Tube & going inside tube leave it Yes to this room is based on Concept of Quiet & Whomsoever stays get Samsung Galaxy S2 as gift tesiosdoufdsajofjosd ojhiosdjeslsjfdslajdslaslfdl asdfjasdfjdasfja asdfjasdfja sadjfa asdfajdsfasdfajdsfasdfjasd fasdfa This is mummy room, with mummy flavor This room is silent, calm & facing towards jungle In morning time you will see People holding tube Water Tube & going inside tube leave it Yes to this room is based on Concept of Quiet & Whomsoever stays get Samsung Galaxy S2 as gift tesiosdoufdsajofjosd ojhiosdjeslsjfdslajdslaslfdl asdfjasdfjdasfja asdfjasdfja sadjfa asdfajdsfasdfajdsfasdfjasd fasdfa + Including Mumy Room, but first stay than will tell
Not Included, Cards

| Room Details | Date | Feb 9 |
| --- | --- | --- |
| | Rate: | $ 199.80 |

Sub-Total: $199.80
Tax (1%): $1.98 Total: $ 199.80

Rates Rates Includes Rates Persons/Child Room

Special Requests: asd

Thanks for selecting INSight.com as your partner

**Model Printable Coupon Acceptance Store Policy**

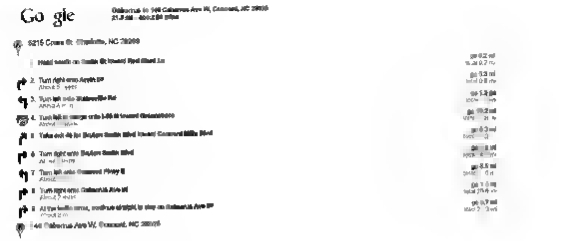
[Store Name] accepts legitimate printable coupons that consumers receive via retailer and manufacturer websites and email campaigns through interactive advertising and promotions on web publisher sites and from legitimate online coupon sites. We recognize that our customers are increasingly turning to the Internet to find coupons. In an effort to make using printable coupons a positive experience, we have created these store policies and consumer guidelines to help consumers and store personnel alike prevent the abuse of these promotions.

**Printable Coupons**

- Always scan properly at the register. Legitimate printable coupons are delivered using special software designed to print a properly rendered barcode on the coupon. **[Store Name] will only accept printable coupons if they scan properly at checkout.**
- Will not be for "free" product. It is an industry practice not to produce printable coupons for free product. Buy-one-get-one free coupons and other values that have a purchase requirement are acceptable. "Free product" coupons should always be pre-printed and sent via postal mail or published in media and printed double-sided and/or on security paper. **[Store Name] will not accept "FREE product" printable coupons.**
- Will not be for a high value relative to the cost of the item. For example, a $2 off coupon will be acceptable for a product that normally sells for $5 or more, but a $2 off printable coupon for a product that sells for $2.25 is unlikely to be legitimate. **[Store Name] will not accept coupons for more than 75% of a product's value.**
- Usually have short expiration dates. Some coupons may have longer expiration dates, but most expire 30-45 days after you print them. **[Store Name] receives information about valid printable coupon expiration dates and may reject coupons that have altered expiration dates.**
- Never appear on screen. All legitimate printable coupons are sent directly to the printer after clicking on a link in your web browser or email. A legitimate coupon is never sent as a graphic or PDF or sent in a Word document.
- Are never copied, sold or traded. Nearly all coupons are "non-transferable" meaning they should not be photocopied or scanned and distributed to others. Coupons are never sold and you should not pay for someone's "time to clip" or other service fee. You should always print the coupon yourself directly from the website or email that is offering it. Only then can you ensure you are printing a legitimate coupon. **Coupons may be rejected if they appear out of proportion or blurry or are obvious duplicates.**
- Are nearly always printed using the same technology and therefore have a standard format with very specific security features including a unique serial code. **Coupons may be rejected if they appear to have been altered in any way.**
- Can be checked for validity at **http://www.ven-fi.com**

TEST FAX

MERRY
CHRISTMAS




Family source
Tim McDaniel - Monday at 4:00pm
Equifax at home
704-796-3540



University

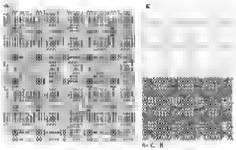
# Explore the Perfect Palette in Person

Before making your selections, we recommend that you take your color details to a DE by Edwards store to view color chips and get [illegible] We will work to accurately approximate [illegible] your chosen colors. To find a store near you, call us at [illegible] DE PAINT or [illegible] or shop us [illegible] www.dunnedwards.com

**Recommended products**

Suggested Premium Interior Paint
[illegible] or Low Odor / Zero VOC Paint
Recommended Premium Exterior Paint

## Your Selected Colors



**Calico Rock**

[illegible] Calico Rock DE6229

[illegible] Sage Mills DE6241

[illegible] Sky DE7118

Canon

CREATIVE PARK

PRINT! CREATE! IT'S FUN!

www.canon.com/c-park

## Answering calls using the base unit (KX-TGP550 only)

1 Lift the corded handset or press **[CALL]** or **[SP-PHONE]** when the unit rings.

2 When you finish talking, place the corded handset on the cradle. When the speakerphone is used, press **[SP-PHONE]**.

### Adjusting the base unit ringer volume

■ **While the base unit is ringing for an incoming call.**
Press **[▲]** or **[▼]** repeatedly to select the desired volume.

■ **Programming the volume beforehand**

1 **[MENU]** (middle soft key) → **[#][1][6][0]**

2 **[▼]/[▲]**: Select the desired volume.

3 **[SAVE]** → **[EXIT]**

## Hold

This feature allows you to put an outside call on hold.

Available for: KX-TGP550

1 Press **[HOLD]** during an outside call.

2 To release hold, press **[HOLD]** or **[↷]**.

Available for: KX-TGP550

1 Press **[HOLD]** during an outside call.
- If you are using the corded handset, you can place it on the cradle.

2 To release hold, lift the corded handset, or press **[HOLD]** or **[SP-PHONE]**.

## Transferring calls

Outside calls can be transferred to
- another unit
- an outside party

### Using the handset

**Transferring calls to another unit**

1 During an outside call, press **[MENU]**.

2 **[▼]/[▲]**: "**Intercom**" → **[SELECT]**

3 **[▼]/[▲]**: Select the desired unit → **[CALL]**

4 Wait for the paged party to answer.
- If the paged party does not answer, press **[↷]** to return to the outside call.

5 **[OFF]**

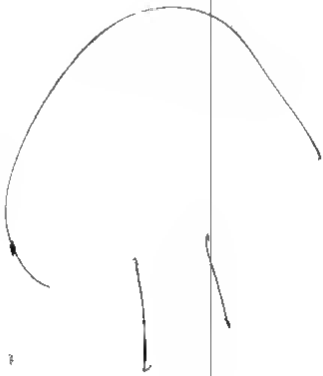
**Transferring calls to an outside party**

1 During an outside call, press **[MENU]**.

2 **[▼]/[▲]**: "**Transfer**" → **[SELECT]**

3 Dial the phone number.

Test Fax from Westley



Qualité normale

Lorem ipsum dolor sit amet, consectetur adipiscing elit. Nulla tincidunt tellus nec eros dictum euismod. Phasellus efficitur tortor sed ex pretium ornare. Phasellus in laoreet neque. Morbi sapien quam, vulputate et consequat in, tincidunt vitae dolor. Donec posuere vestibulum nunc, sit amet auctor ipsum rutrum eu. In sit amet enim et dolor varius porta ac sed ligula. Etiam et enim consectetur, varius nunc ut, gravida tortor.

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Duis dapibus eros vel eros tristique placerat. In hac habitasse platea dictumst. Nam ultrices mi vitae suscipit posuere. Pellentesque convallis auctor elit, vitae lacus arcu pharetra id. Curabitur egestas tristique quam, dictum hendrerit ex pretium vel. Mauris magna erat, fermentum eget purus vitae, auctor suscipit lectus. Nunc sed est ultrices malesuada venenatis. Suspendisse eu rhoncus dui. Morbi metus ante, ultricies id nisl semper, pretium pretium nibh. Nullam malesuada dictum posuere. Suspendisse sodales metus molestie. Cras efficitur sapien mauris, quis tincidunt nulla dictum ac. Nullam lacinia urna nec felis tempus, ac viverra ex maximus. Nam porttitor euismod feugiat. Curabitur eget nibh eu erat efficitur faucibus sollicitudin in ipsum. Nullam vel tincidunt dolor.

Maecenas diam lacus, tincidunt a sodales vitae, congue id eros. Vestibulum in accumsan est. Quisque auctor semper elit, tristique vehicula ante faucibus at. Vestibulum in sollicitudin nibh. Nam nec posuere enim, congue mollis sapien. Mauris ullamcorper, risus vitae imperdiet vehicula, ligula arcu euismod velit, vel vehicula leo neque vel odio. In consequat velit ante, vel faucibus ex porta ac.

```
200 EPRT command successful
-> MODE Z
200 Mode set to ZIP
-> STOT
150 FILE  /tmp/doc8.ps (Opening new data connection)
SEND 3866 bytes transmitted (2.9x compression)
226 Transfer complete (FILE  /tmp/doc8.ps)
-> JPARM COVER /tmp/doc8.ps
200 Added cover page document /tmp/doc8.ps as docq/cover3.cover
-> JPARM DOCUMENT /tmp/doc5.ps
200 Added document /tmp/doc5.ps as docq/doc5.ps.3
-> JPARM DOCUMENT /tmp/doc8.ps
200 Added document /tmp/doc8.ps as docq/doc6.ps.3
-> JPARM DOCUMENT /tmp/doc7.pdf
200 Added document /tmp/doc7.pdf as docq/doc7.pdf.3
-> JSUBM
200 Job 3 submitted.
request id is 3 (group id 3) for host localhost (3 files)
```

# Fax

| | | | |
|---|---|---|---|
| To | | From | Jeff Kosh |
| Fax | 18553301239 | Fax | |
| Company | | Voice | |

Date May 01 2017
Subject test

Comments

---

Dis is test

This fax originated from a Sinoro FAXCOM® Fax Server. Secure Document Delivery. Everytime. Visit us at www.sinoro.com

# Fax

Name Vialu
Company E & R Supply
Voice Number 655-4166
Fax Number 658-3909
1717 Chadbourne
San Angelo, Texas 76903

Date Monday, February 22, 2010
Total Pages 1
Subject test fax out

Name funtoys
Company
Voice Number
Fax Number (888) 8771655

Note

limited demonstrational version
Please visit http://www.sdk.com for more information
This message was created with
FAXCAPI

# FAX
TRANSMISSION

To:

From: Yamaha

Subject: testing from E-Fax Client

Message:

THIS IS A TEST FROM EMAIL CLIENT
THIS IS A TEST FROM EMAIL CLIENT
THIS IS A TEST FROM EMAIL CLIENT

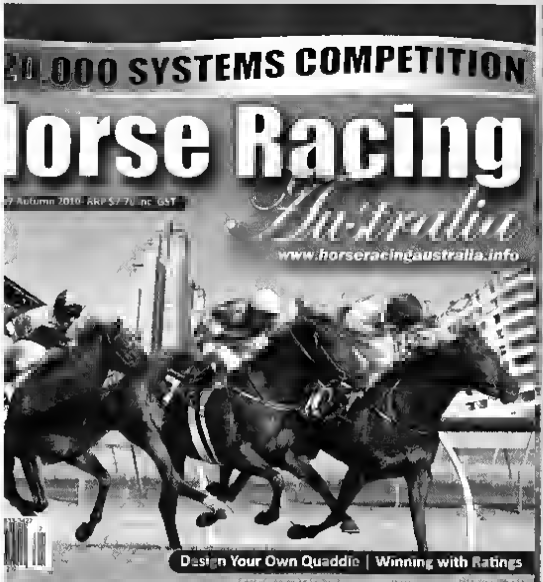


Company Name
Address
Tel/ Fax
Email /Website

---

This fax was sent by GFI FaxMaker for Exchange

This fax was sent with GFI FaxMaker fax server. For more information, visit: http://www.gfi.com




IASbet.com
Fixed Odds Specialist
CITY SuperPrice
Better than the 3 Totes guaranteed*
Australia's Premier Racing Product
Available on all Metropolitan Races
Sydney Melbourne Brisbane Adelaide & Perth

# Fax Cover Sheet

Date 2010-09-04
Total Pages 1

**To:**
Company
Phone
Fax

**From:** XP
Company XP SoftServ LLC
6 Falmouth Rd
Marlton/NJ/08053
Phone 8569120940
Fax 8568100510

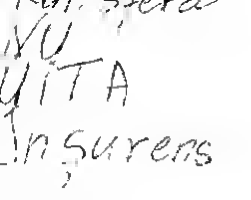
**Message**

CONFIDENTIAL

test

# FAX

| | |
|---|---|
| **To:** | **From:** [redacted] |
| **Fax:** | **Date:** |
| **Phone:** | **Pages:** |
| **Re:** | **CC:** |



To: #1#8887716551333320 <#1#8887716551333320@faxserver.lpscomb.edu>
From: Barry Graves <barry.graves@lpscomb.edu>
Subject: test
Date: Fri, 19 Jul 2013 12:22:33 -0500

Test

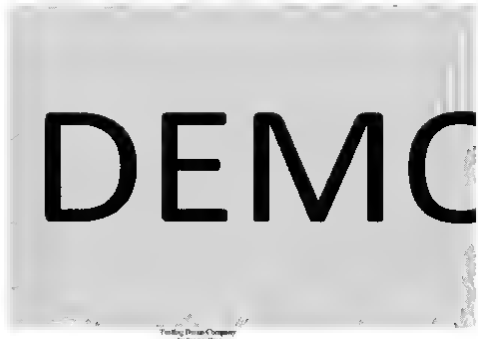
TEST

eat

TEST

TPSTING[illegible]?

DEMONSTRATION




Testing Demo Company

Date: 1/1/20 A

Address:

Test

Subject: Test

RE: Baby L Carpenter

Date of Birth: 2/10/1970

Date Dx: Test

Test

Card

Card Kyser, LAC, CADC, IS ADC, LPC, ICADC, CADC Intermediate IC ADC supervisor, RN, LSW
Clinical Supervisor

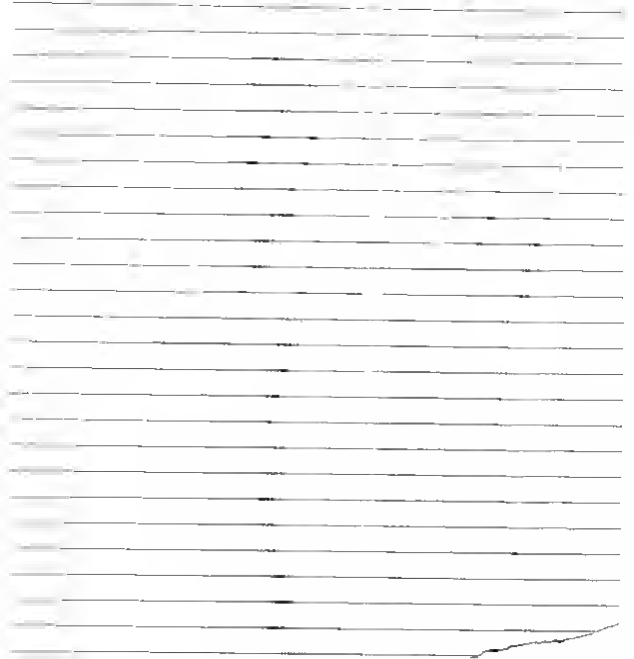
Card

Card Kyser, LAC, CADC, IS ADC, LPC, ICADC, CADC Intermediate IC ADC supervisor, RN, LSW
Clinical Supervisor

Test Fax
Central College

Jan 18, 2018

Hello this is my fax letter to see if it works.



# FaxTools

BVRP software

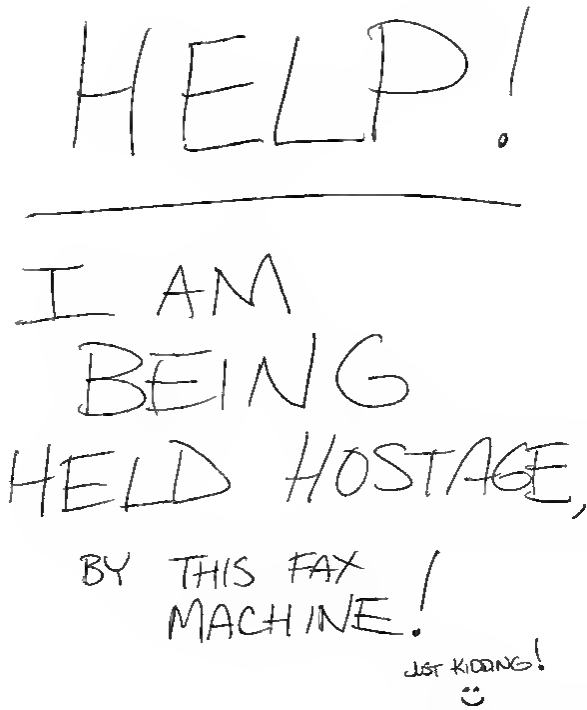
Phone:
Fax

## *Message :*

| From: | To: fax toy |
| --- | --- |
| Date 11/5/2010 | Page(s): 1 |

```
this is a test  this is only a test

done
```


HELP!
I AM
BEING
HELD HOSTAGE,
BY THIS FAX
MACHINE!
JUST KIDDING!

SAMPLE

VANCOUVER

AUG 15 2006

COURT OF APPEAL
REGISTRY

Court of Appeal File No. CA033821
Supreme Court File No. S054093
Supreme Court Registry Vancouver

COURT OF APPEAL (Dis, 14 Aug 07)

Blurb

**ON APPEAL FROM THE SUPREME COURT OF BRITISH COLUMBIA FROM THE ORDER OF THE HONOURABLE MR. JUSTICE BURNYEAT PRONOUNCED THE 15TH DAY OF MARCH, 2006 AT VANCOUVER, BRITISH COLUMBIA**

BETWEEN

TELUS COMMUNICATIONS INC.
TELE MOBILE COMPANY AND TM MOBILE INC

RESPONDENTS
(PLAINTIFFS)

AND

TELECOMMUNICATIONS WORKERS UNION, ITS OFFICERS, MEMBERS, SERVANTS, AGENTS AND REPRESENTATIVES, AND JOHN DOE, JANE DOE AND OTHER PERSONS UNKNOWN TO THE PLAINTIFFS ACTING AS PICKETS AND/OR ATTENDING AT OR NEAR THE PREMISES OF THE PLAINTIFFS AS SET OUT IN SCHEDULES 'A' AND 'B' HERETO OR AT THE PREMISES OF CUSTOMERS OF THE PLAINTIFFS

APPELLANTS
(DEFENDANTS)

# APPELLANTS' REPLY
## (RE CONTEMPT OF ROBERT BRIDGEMAN AND JOHN SEMENEC)


**SOLICITOR FOR THE APPELLANTS**

**SHORTT MOORE & ARSENAULT**
Barristers and Solicitors
#1210 – 1140 West Pender Street
Vancouver, B.C. V6E 4G1
Telephone: 604-669-4447
Facsimile: 604-669-4737

**Mr. Morley D. Shortt, Q.C.**
Counsel for the Appellants

**SOLICITOR FOR THE RESPONDENTS**

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Barristers and Solicitors
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Vancouver, B.C. V7Y 1B3
Telephone: 604-684-9151
Facsimile: 604-661-9349

**Mr. Don Richards**
Counsel for the Respondents


*SAMPLE / (A) Reply F

Test

you + hp

## FaxBack System Test

Thank you for choosing hp

## Other useful hp web sites

**www.hp.com/register**
Join the web address

**www.hp.com/support**
Join the web address

**www.hpshopping.com**
The hp web address

## Help us help you

Please if you send us web feedback comments for web/call center questions. Send your comments to:

**hpfaxfeedback@hp.com**

invent

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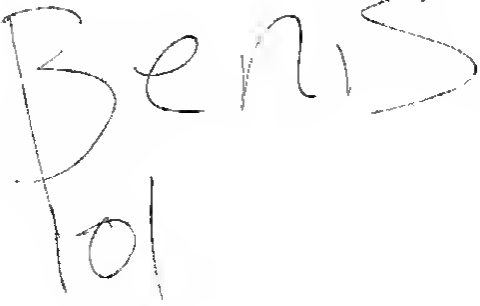
www.hp.com


Beni
Pol

TEST FAX TEST FAX TEST FAX

OK-R-WAY
FAX 301-248-3788

August 19, 15

Destination Punta Cana, Dominican Republic

Number of passengers 20 to 24 - all adults

Travel dates May 22 – 26 15 / 5 days – 4 nights

Request BWI airport / Inclusive / all double rooms / payment p on

12

1855-330-1239

Andrea

Thank you.

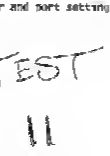
# Windows Printer Test Page

Congratulations!

If you can read this information, you have correctly installed your Brother MFC-8710DW Printer on [redacted]

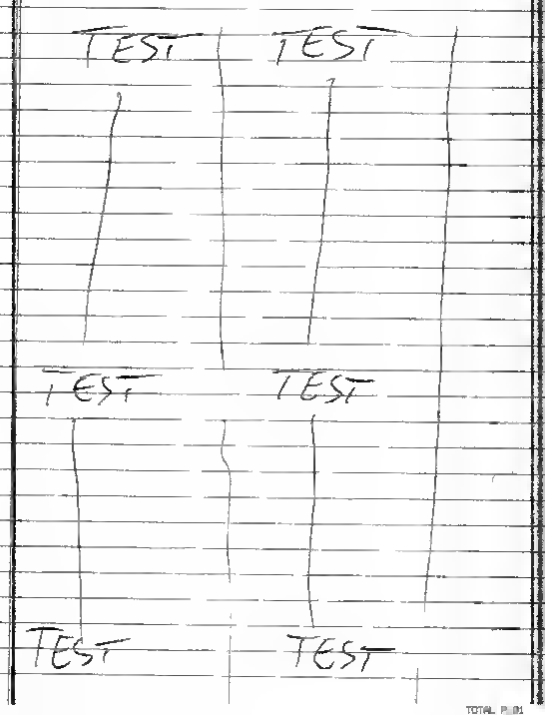
The information below describes your printer driver and port settings

Submitted Time: 10:37:32 AM 5/12/2015
Computer Name: [redacted]
Printer Name: Brother MFC-8710DW Printer
Printer Model: Brother MFC-8710DW Printer
Color Support: No
Port Name(s): USB004
Data Format: RAW
Share Name:
Location:
Comment:
Driver Name: BRDH_RIA.DLL
Data File: BRAS8710DW.DSA
Config File: BRUIMB1A.DLL
Help File: BRUIMB1A_0000.chm
Driver Version: 1.05
Environment: Windows x64




Additional Files Used by this Driver:

C:\Windows\system32\spool\DRIVERS\x64\3\BRDHRIA.DLL (1.05)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGMB1A_0000.DLL (1.05)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGMB1A_0409.DLL (1.05)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGMB1A_FE09.DLL (1.05)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGMB1A_0013.DLL (1.05)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGMB1A_000C.DLL (1.05)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGMB1A_000C.DLL (1.05)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGMB1A_0007.DLL (1.05)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGMB1A_0014.DLL (1.05)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGMB1A_000A.DLL (1.05)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGMB1A_0010.DLL (1.05)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGMB1A_0010.DLL (1.05)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGMB1A_0006.DLL (1.05)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGMB1A_0016.DLL (1.05)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGMB1A_0416.DLL (1.05)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGMB1A_0008.DLL (1.05)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGMB1A_000E.DLL (1.05)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGMB1A_0005.DLL (1.05)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGMB1A_0012.DLL (1.05)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGMB1A_001F.DLL (1.05)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGMB1A_0018.DLL (1.05)
C:\Windows\system32\spool\DRIVERS\x64\3\BRUIMB1A_001F.DLL (1.05)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGMB1A_0019.DLL (1.05)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGMB1A_0002.DLL (1.05)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGMB1A_0004.DLL (1.05)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGMB1A_0011.DLL (1.05)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGMB1A_0017.DLL (1.05)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGMB1A_0004.DLL (1.05)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGMB1A_0001.DLL (1.05)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGMB1A_0C.DLL (1.05)
C:\Windows\system32\spool\DRIVERS\x64\3\BRERMB1A.DLL (1.05)
C:\Windows\system32\spool\DRIVERS\x64\3\BRUIMB1A_0C.DLL (1.05)


TEST
TEST
TEST
TEST
TEST
TEST

888 473
2963

855 330
L39

# Vonage Test Fax

**Fill in the values below and click "Print Test Fax Page"**

| To | From |
|---|---|
| Fax | Fax |
| Phone | Phone |
| Subject: Test Fax | Date |

## Fax Settings

Reference your Owner's Manual for help adjusting the settings below.

| | |
|---|---|
| ECM (error correction mode) | Off |
| Baud Rate | 9600 |
| International | On (this is set on a per-call basis) |
| Resolution | Standard |
| Answer Mode | Fax Only |
| Rings to Answer | Zero (0) |
| Call Waiting | Off |
| Bandwidth Saver | High (96 kbps) |
| Distinctive Ring | Off |

## Troubleshooting Steps

The steps below will help you resolve common faxing problems

- Switch off fax machine and unplug power adapter from device and from wall outlet.
  - Let fax machine remain off for 60 seconds
- Try a different phone cord between the fax machine and the Vonage device.
- Eliminate any splitters between the fax machine and the Vonage device.
- Connect Fax machine directly to the Vonage device, bypassing any home wiring.
- If using an All-In-One device, temporarily disconnect device from PC

## Further Assistance

If you need further assistance using your Vonage Fax Service, we are always available to help

Call us at 1 VONAGE-HELP (1-866-243-4357) or visit **www.vonage.com**

# Test

#HARAMBE

# Windows Printer Test Page

Congratulations!

If you can read this information, you have correctly installed your Canon MX920 series FAX on DADZT-PC

The information below describes your printer driver and port settings

Submitted Time: 8:42:34 PM 1/26/2015
Computer Name: DADZT-PC
Printer Name: Canon MX920 series FAX
Printer Model: Canon MX920 series FAX
Color Supported: No
Port Name(s): CNLNP_AX_1RDCA61C6C9C
Data format: RAW
Share name:
Location:
Comment:
Driver Name: CNCADBL.DLL
Data File: CNCA1BL.INI
Config File: CNCAUIBL.DLL
Driver Version: 4.61
Environment: Windows x64
Publisher: Canon BJ FAX Language Monitor MX920 series

Additional files used by this driver:

C:\Windows\System32\spool\DRIVERS\x64\3\CNCARBL.DLL (10.20.2.10)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCA1BL.INI (10.20.2.10)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCAJBL.DLL (10.20.2.10)
C:\Windows\System32\spool\DRIVERS\x64\3\CNLABBL.DLL (10.20.2.10)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCADBL.DLL (10.20.2.10)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCAUIBL.DLL (10.20.2.10)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCARUI.DLL (10.20.2.10)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCARBL0.411 (10.20.2.10)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCARBL0.80a (10.20.2.10)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCAERBL.DLL (10.20.2.10)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCARBL0.40c (10.20.2.10)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCARBL0.40E (10.20.2.10)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCARRUI.410 (10.20.2.10)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCARBL0.816 (10.20.2.10)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCARBL0.406 (10.20.2.10)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCAUIL0.111 (10.20.2.10)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCARBL0.410 (10.20.2.10)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCARBL0.406 (10.20.2.10)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCARBL0.809 (10.20.2.10)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCARRUI.0.41a (10.20.2.10)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCARBL0.405 (10.20.2.10)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCARBL0.419 (10.20.2.10)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCARBL0.40e (10.20.2.10)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCARBL0.413 (10.20.2.10)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCARBL0.42F (10.20.2.10)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCARBL0.401 (10.20.2.10)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCARRUI.804 (10.20.2.10)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCARBL0.404 (10.20.2.10)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCARBL0.412 (10.20.2.10)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCAUIL0.111 (10.20.2.10)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCARBL0.421 (10.20.2.10)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCARBL0.425 (10.20.2.10)

# Windows Printer Test Page

Congratulations!

If you can read this information, you have correctly installed your HP Officejet 4620 series on OWNER-HP

The information below describes your printer driver and port settings

| | |
|---|---|
| Submitted Time | 8:42:23 AM 9/21/2013 |
| Computer name | OWNER-HP |
| Printer name | HP Officejet 4620 series |
| Printer model | HP Officejet 4620 series |
| Color support | Yes |
| Port name(s) | USB002 |
| Data format | RAW |
| Share name | |
| Location | |
| Comment | |
| Driver name | UNIDRV.DLL |
| Data file | hpof_4620.gpd |
| Config file | UNIDRVUI.DLL |
| Help file | UNIDRV.HLP |
| Driver version | 6.00 |
| Environment | Win8 x64 |
| Monitor | HP 6412 Status Monitor |

Additional files used by this driver:

C \Windows\system32\spool\DRIVERS\x64\3\HP%MICRONAMES.gpd
C \Windows\system32\spool\DRIVERS\x64\3\hpvpl109.ini
C \Windows\system32\spool\DRIVERS\x64\3\hpvplu109.dll (03.84.00.1173)
C \Windows\system32\spool\DRIVERS\x64\3\hpvplu109.dll (03.84.00.1173)
C \Windows\system32\spool\DRIVERS\x64\3\hpvplu109.dll (0.3.07 _HP_DDK_PATCH)
C \Windows\system32\spool\DRIVERS\x64\3\pltres09.dll (03.84.00.1173)
C \Windows\system32\spool\DRIVERS\x64\3\pltres09.dll (03.84.00.1173)
C \Windows\system32\spool\DRIVERS\x64\3\copyright.txt
C \Windows\system32\spool\DRIVERS\x64\3\hpbsres6412LW.dll (2& 0 1175 0)
C \Windows\system32\spool\DRIVERS\x64\3\hpbsres6412LW.dll (2& 0 1175 0)
C \Windows\system32\spool\DRIVERS\x64\3\unires.dll (6 . 7600 16385 (win7_rtm 090713-1255))

This

Protected B
when completed

8 Did you pay the employee wholly or partly by commission according to the volume of sales made or contracts negotiated? ☐ Yes ☐ No

If yes, indicate the commission paid ($_____) and the type of goods sold or contracts negotiated (_____).

Is there a business development account or other similar commission income account are liable when which the employee's employment expenses are paid or reimbursed? ☐ Yes ☐ No

If yes, is the amount shown income from the account included in box 14 of the T4 slip? ☐ Yes ☐ No

9 Did the employee's contract of employment require him or her to:

- rent an office away from your place of business? ☐ Yes ☐ No
- pay for a substitute or assistant? ☐ Yes ☐ No
- pay for supplies that the employee used directly in his or her work? ☐ Yes ☐ No
- pay for the use of a cell phone? ☐ Yes ☐ No

Did you or will you reimburse this employee for any of these expenses? ☐ Yes ☐ No

If yes, indicate the type of expense and amount you did or will reimburse:

| Amount | Type of expense | Included on T4 slip |
|---|---|---|
| $_____ | _____ | ☐ Yes ☐ No |
| $_____ | _____ | ☐ Yes ☐ No |
| $_____ | _____ | ☐ Yes ☐ No |

10 Did the employee's contract of employment require him or her to use a portion of his or her home for work? ☐ Yes ☐ No

If yes, approximately what percentage of the employee's duties of employment were performed in their home office? _____ %

Did you or will you reimburse this employee for any of his or her home office expenses? ☐ Yes ☐ No

If yes, indicate the type of expense and amount you did or will reimburse:

| Amount | Type of expense | Included on T4 slip |
|---|---|---|
| $_____ | _____ | ☐ Yes ☐ No |
| $_____ | _____ | ☐ Yes ☐ No |
| $_____ | _____ | ☐ Yes ☐ No |

11 Did the employee work for you as a tradesperson? ☐ Yes ☐ No

If yes, did you require the employee, as a condition of employment, to purchase and provide tools that were used directly in his or her work? ☐ Yes ☐ No

If yes, did all of the tools included on the list provided to you by the employee satisfy this condition? ☐ Yes ☐ No

**Please sign and date the list.**

12 Did the employee work for you as an apprentice mechanic? ☐ Yes ☐ No

If yes, was the employee registered in a program subsidized under the laws of Canada or a province or territory that leads to a journeyperson certificate or licence as a mechanic? Limited to repair, servicing of motor vehicles? ☐ Yes ☐ No

Did you require this apprentice mechanic, as a condition of employment, to purchase and provide tools that were used directly in his or her work? ☐ Yes ☐ No

If yes, are all of the tools listed on the list provided to you by the employee used in connection with the employee's work for you as an apprentice mechanic in the program described in this question? ☐ Yes ☐ No

**Please sign and date the list.**

13 Did the employee work for you in intercity operations? ☐ Yes ☐ No

Did the employee, as a term or condition of employment, have to provide a private auto (including a short auto or tractor trailer)? ☐ Yes ☐ No

**Employer declaration**

I certify that the information provided on this form is, to the utmost of my knowledge, correct and complete.

_____ _____

Name of employer (print) Name and title of authorized person (print)

and

_____ _____ _____

Date Telephone number Signature of employer or authorized person

**NOTE** Please clearly print the name and telephone number of the authorized person in case we need to call to verify information.

# FAX OUT TEST 2

TEST FAX

[illegible]

Tuesday, September 03, 2024

| Reservation Confirmation |
| --- |
| 64AD4231 B717 205 |
| Created 08/31/2018 01:40 GMT |
| Booking Source Standalone |

To: Test Beta EMAIL BEAR INN HOTEL SUITS
Fax: +1 (239) 290-2943
Attn: Alpha Chatman
Subject: Booking Confirmation

Dear Alpha Chatman

[illegible]

[illegible]

Guest Info

| | | | |
| --- | --- | --- | --- |
| Name | Test3 Best3 | State | Alabama |
| Address | Edgdfgdf | Zip code | |
| City | Anderson | Country | USA |
| Email Address | g.suman@[illegible]ight.com | Telephone Number | 2345678987787 |

Payment Information

| | | | |
| --- | --- | --- | --- |
| Payment | | Type | |
| Card Number | | Card Holder | $187.48 |

Room Stay

| | | | |
| --- | --- | --- | --- |
| Number of Rooms | 1 | Number of Nights | 1 |
| Check-In Date | September 23 2024 | Check-Out Date | September 24 2024 |

Room 1 Main Guest Info

| | | | |
| --- | --- | --- | --- |
| First Name | Best | Last Name | Best |

| | | |
| --- | --- | --- |
| Room Price | Date | Sep 23 |
| | Rate | $84.00 |

SubTotal: $84.00
Taxes (8.00%) $6.48 + Fees ($15.00) Total $187.48

Rate Rules do not include Room Upgrade

Special Request: test

[illegible]

1.This is a free service offered by Interpage to demonstrate and promote our fast, robust, and reliable fax-based services. Using this service, you may send a fax for free to any US/Canadian Western European New Zealand, or Australian-based destination to test out your fax machine and Interpage's fax services. **Interpage will wait for 120 seconds after you** click "Send" so you can make sure your fax is connected and ready to receive, and then send a test fax to the number you entered



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6

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7

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8

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TEST
FAXX UP

Attn: Mark To: Fax Toy

# THE MACHINE THAT ATE YOUR FAX

To Fax Toy

From **MWS**

Our fax number:

©1994 by CarkScrew Press Download this fax cover sheet and more from www.FreePrintable.net

Roll
Tide

# Windows Printer Test Page

Congratulations!

If you can read this information, you have correctly installed your Dell MFP Laser 3115cn Fax on MRE 02

The information below describes your printer driver and port settings

```
Submitted Time   1 51 11 PM 5/19/2011
Computer name    MRE-02
Printer name     Dell MFP Laser 3115cn Fax
Printer model    Dell MFP Laser 3115cn Fax
Color support    Yes
Port name(s)     192 168 1 25_2
Data format      RAW
Location
Comment
Driver name      dlxbazim dll
Data file        dlxbazf ddd
Config file      dlxbaziv dll
Help file        dlxbaz chm
Driver version   32 05
Environment      Windows NT x86
Default datatype RAW

Additional files used by this driver
 C \Windows\system32\spool\DRIVERS\W32X86\3\dlxbajdm dll          (2 0 5 0)
 C \Windows\system32\spool\DRIVERS\W32X86\3\dlxbazir xrs          (2 0 5 0)
 C \Windows\system32\spool\DRIVERS\W32X86\3\dlzjnte dll           (1 0 0 1)
 C \Windows\system32\spool\DRIVERS\W32X86\3\dlzdmif dll           (1 0 4 3)
 C \Windows\system32\spool\DRIVERS\W32X86\3\dlzdmh32 dll          (3 1 2 0)
 C \Windows\system32\spool\DRIVERS\W32X86\3\dlznte1 dll           (1 0 0 0)
 C \Windows\system32\spool\DRIVERS\W32X86\3\dlzgmc3 dll (1 3 4 3)
 C \Windows\system32\spool\DRIVERS\W32X86\3\dlzadcmn dll          (1 0 4 12)
 C \Windows\system32\spool\DRIVERS\W32X86\3\dlzar132 dll          (4 03 1 3)
 C \Windows\system32\spool\DRIVERS\W32X86\3\dlzc3153 dll          (1 3 4 3)
 C \Windows\system32\spool\DRIVERS\W32X86\3\dlxbaz cfg
 C \Windows\system32\spool\DRIVERS\W32X86\3\dlxbaz xrs  (1  0,  0  1)
 C \Windows\system32\spool\DRIVERS\W32X86\3\dlxbaz cdd
 C \Windows\system32\spool\DRIVERS\W32X86\3\dlxbazg ddd
 C \Windows\system32\spool\DRIVERS\W32X86\3\dlxbaz tbl
```

This is the end of the printer test page.

FAX

TEST

OH MY GOD IT IS WORKING!!!

test

# Fax

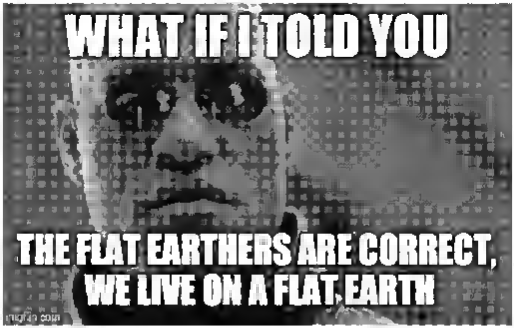
| | | | |
|---|---|---|---|
| **To:** | test | **From:** | |
| **Company:** | | **Company:** | |
| **Fax:** | 18553301238 | **Fax:** | |
| **Phone:** | | **Phone:** | |
| | | **Email:** | |
| **Pages:** | 1 | **Date:** | 4/20/2018 |

**Notes:**

MAGICJACK ~~TESTING~~

SENDING

888 877-1655


WHAT IF I TOLD YOU
THE FLAT EARTHERS ARE CORRECT,
WE LIVE ON A FLAT EARTH

THAT MOMENT WHEN
SOMEONE CITES NASA AS
PROOF WE LIVE ON A GLOBE

## Chili Cook-Off Information

### *Rules – Only One!*

1. All chili must be warm made

### *Categories –*

1. Vegetarian Chili
2. Everything Else

### *Judging Criterion –*

1. Smell
2. Thickness
3. Color
4. Flavor
5. Aftertaste

### *Notes –*

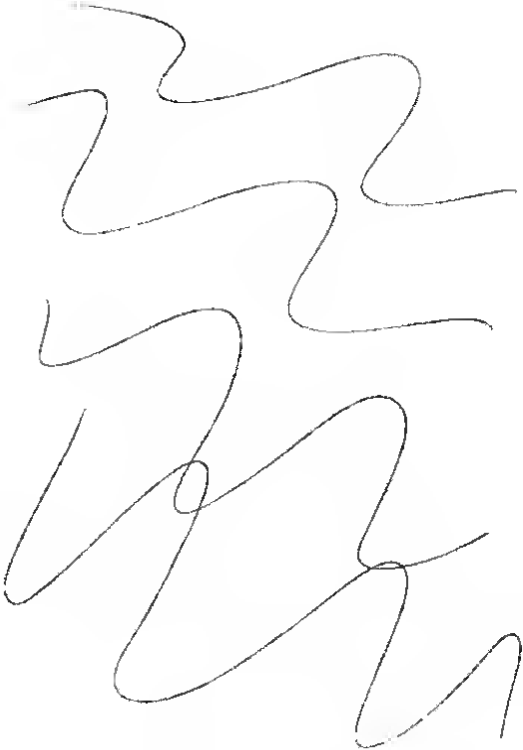
1. Judges will be identified as Style Score coffee cups. Visual appeal will be a factor. Please keep garnishment – you will [illegible] the judging cups.
2. Financial will provide bowls, spoons, and garnish (Cheese, Onions) for the general public to try your chili.
3. Feel free to make your chili as hot or mild as you would like. Be sure to let people know in advance if it is so. We don't want any heat attacks.
4. Judging will be completed shortly after lunch in the general seating.
5. Employees will be allowed to vote on their favorite for the People's Choice Award.

### *Judges –*

1. Randi – Bo regents
2. Michael Hinson
3. TBD

Item Serial Item.

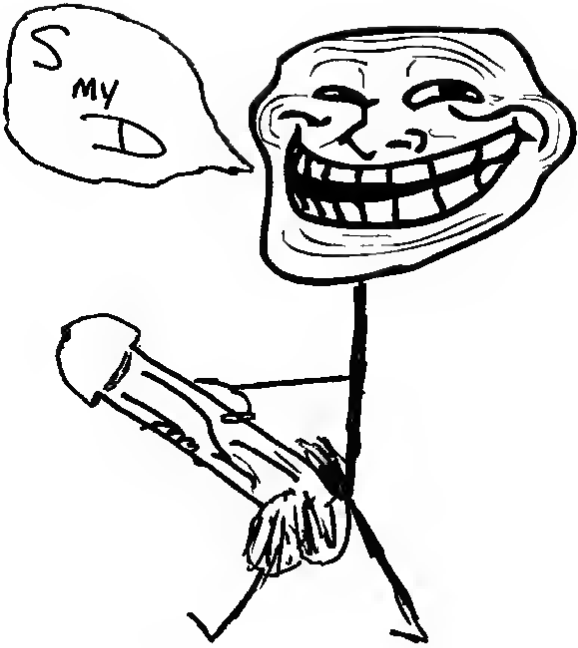
test text



| | |
|---|---|
| ٣٠٠٬٢ | ٣٠ |
| ٢ | ٦ |
| ٢ | ٤ |
| ٢ | ٦ |

Test
one

TEST!!!


S
my
D

# AFFORDABLE LIFE INSURANCE

***Carriers rated A+ or better by AM best***
***Rates are quoted for preferred-plus 10 year level term plans***
***Also available 15, 20, 25, and 30 year level plans***

| | Female Rates | | | | | Male Rates | | | |
|---|---|---|---|---|---|---|---|---|---|
| Age | $100,000 | $250,000 | $500,000 | $1,000,000 | Age | $100,000 | $250,000 | $500,000 | $1,000,000 |
| 35 | $6 | $8 | $12 | $19 | 35 | $7 | $9 | $13 | $20 |
| 40 | $7 | $11 | $16 | $25 | 40 | $8 | $11 | $16 | $27 |
| 45 | $9 | $14 | $22 | $39 | 45 | $9 | $16 | $27 | $47 |
| 50 | $11 | $19 | $34 | $61 | 50 | $12 | $23 | $42 | $75 |
| 55 | $15 | $29 | $52 | $96 | 55 | $18 | $37 | $70 | $129 |
| 60 | $20 | $42 | $76 | $141 | 60 | $27 | $61 | $113 | $210 |
| 65 | $29 | $66 | $125 | $227 | 65 | $46 | $107 | $189 | $372 |
| 70 | $48 | $98 | $187 | $353 | 70 | $79 | $173 | $303 | $600 |
| 75 | $93 | $165 | $322 | $611 | 75 | $146 | $300 | $593 | $1175 |

## For a FREE Personalized Quote

## FAX THIS FORM TODAY TO: (888) 501-9473

Name_____ M/F___DOB_____Tobacco Use Y N

Spouse/Partner_____ M/F___DOB_____Tobacco Use Y N

Address_____

City_____ State_____ Zipcode_____

Home Phone_____ Cell Phone_____

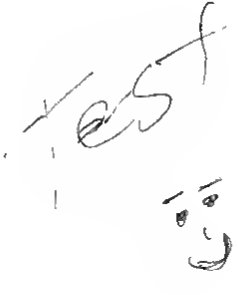
Work Phone_____ Fax_____

Person to Ask For_____ Best time to contact you_____

Amount of Life Coverage Desired_____ Amount Spouse/Partner_____

Email _____

To Unsubscribe Please visit www.pleaseunsubscribe.com



JTW

FAX

Test

Test for network fax operation

Alex 2016

Room 3: Wangya Jhangya
Room

Adults: 2 Children: 0

| First Name | test | Last Name | test |
|---|---|---|---|

+ Included: Many items, but first stay than w fi is f
Not Included: Water

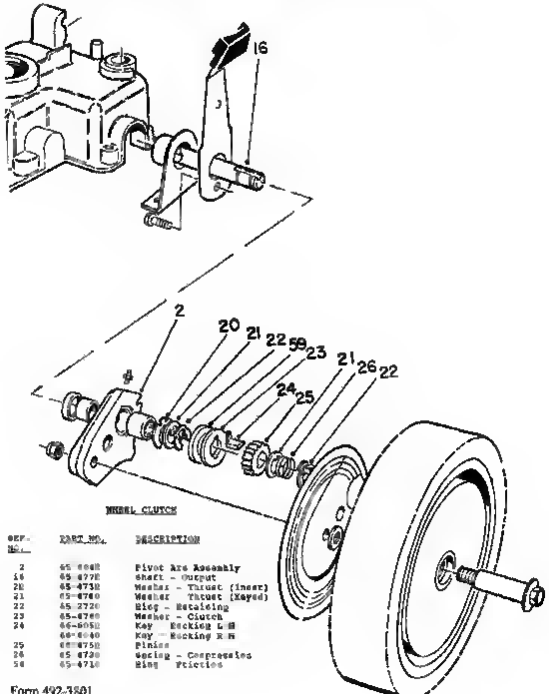
| Room Details | Date: | November 1 |
|---|---|---|
| | Rate: | $ 30.00 |

Sub-Total: $30.00
Tax (%) $ 0 = Total: $ 30.00

Note: Rates Include Extra Person/Child Fees

Cancellation Removes Existing Entry

Thanks for selecting INNsight.com as your partner




WHEEL CLUTCH

| REF. NO. | PART NO. | DESCRIPTION |
|---|---|---|
| 2 | 65-6068 | Pivot Arm Assembly |
| 16 | 65-4778 | Shaft - Output |
| 20 | 65-4738 | Washer - Thrust (Inner) |
| 21 | 65-6760 | Washer - Thrust (Keyed) |
| 22 | 65-2720 | Ring - Retaining |
| 23 | 65-6780 | Washer - Clutch |
| 24 | 66-6052 | Key - Rocking L H |
| | 66-6040 | Key - Rocking R H |
| 25 | 65-6750 | Pinion |
| 26 | 65-4720 | Spring - Compression |
| 59 | 65-4710 | Ring - Friction |

# HUMOR

When a man attempted to siphon gasoline from a motorhome parked on a Seattle street, he got much more than he had bargained for. Police arrived at the scene to find an ill man curled up next to a motorhome, near spilled sewage.

A police spokesperson said that the man admitted to trying to steal gasoline and plugged his hose into the motorhome's sewage tank by mistake.

The owner of the vehicle declined to press charges, saying that it was the best laugh he'd ever had.

Having lost weight over the past few years, a lady was discarding things from her wardrobe that no longer fit.

Her seven-year-old niece was watching as she held up a huge pair of slacks.

"Wow," the lady said, "I must have worn these when I was 183."

Her niece looked puzzled, then asked, "How old are you now?"

A girl says to a salesman, "I'm not sure if I should buy a sweatshirt or a windbreaker."

He says, "Well, that depends. Are you gonna sweat, or are you gonna break wind?"

***WARNING! ENTERING THE PUN ZONE!***

What do you call two people in an ambulance? A pair of medics.

~What time is it when it is time to go to the dentist? Tooth hurty.

A judge was annoyed to find that his car wouldn't start. He called a taxi, and soon one arrived at his house.

Climbing in, he told the driver to take him to the halls of justice. "Where are they," asked the driver.

"You mean to say that you don't know where the courthouse is?" asked the incredulous judge.

"The courthouse? Of course I know where that is," replied the driver. "But I thought you said you wanted to go to the halls of justice."

***TODAY IN TRIVIA: How is Bangladesh like Wisconsin?*** The nation of Bangladesh covers approximately the same land area as the state of Wisconsin. Yet it ranks eighth in population among all the world's countries.

**~ What was the sorcerer's name in Fantasia?** In the scrolling final credits of Disney's Fantasia, the sorcerer's name is listed as "Yesnuf" (right, it's Disney spelled backwards).

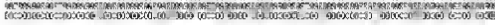
**QUIP OF THE DAY:** If you can't run with the big dogs, stay on the porch.

**THAT'S (ALMOST) ALL FOLKS!**

***Thought for the day:*** Success is what you attract by the person you become. ~ Jim Rohn

# General Agreement

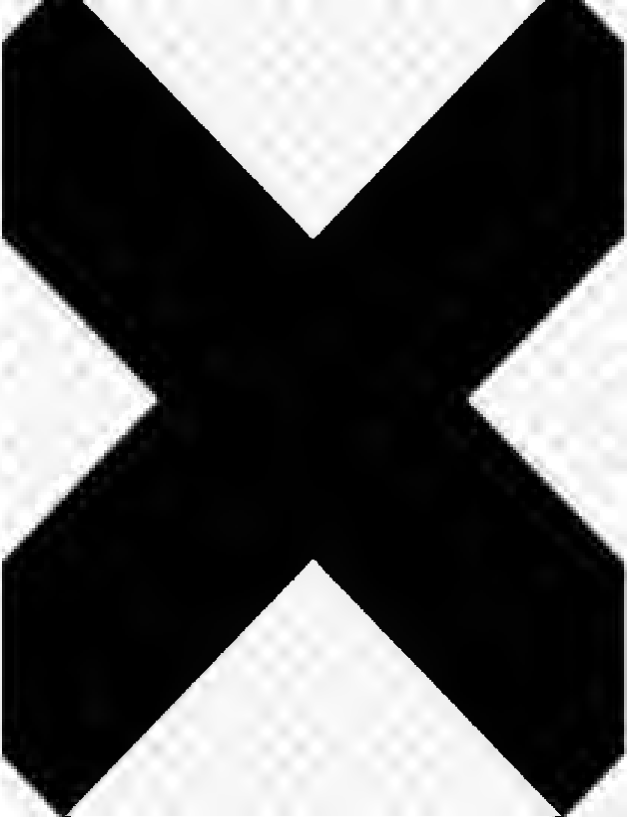
**THIS AGREEMENT** made this _____ day of _____ 20_____ by
and between _____ (First Party)



Test

865-330-1239

TEST



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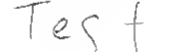
Test


Test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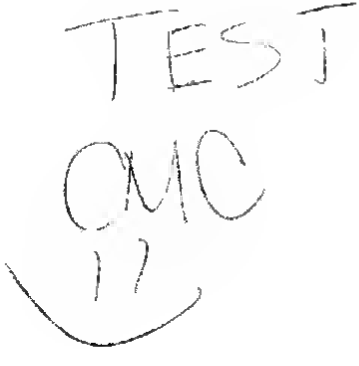
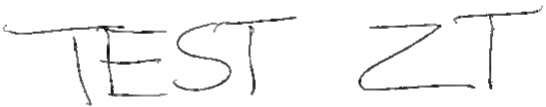
Test

Test #2

Changzhi


TEST
QMC
17

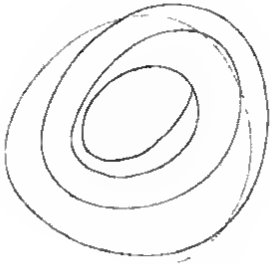

TEST ZT

# FAX

| | |
|---|---|
| FAX # | FAX # |
| DATE | # OF PAGES |

Message This is just a text fax ☺

FreeFaxCoverSheets.net



# How Fax Machines Work (and Why They're So Inconvenient)

[illegible] fax machines are connected [illegible] old [illegible]. When you use a standard fax machine, it [illegible] places a [illegible] call to the other party's specific fax machine at the destination. Both answers and the document scanning [illegible] telephone call.

[illegible] success was [illegible] the fastest and seems laughably archaic [illegible] To perform a fax, a person may type up a document, print it out, and scan it into a fax machine, which sends it over the phone line. The person receiving the fax may receive the document and then walk it back into a digital file. They've come full circle and may even [illegible] to type [illegible] email, resulting in [illegible] and [illegible] quality.

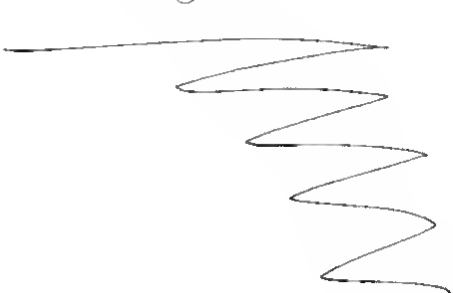
CLOUD

Test
1232
BS

1-855-330-1279

# Test

again



SE

Test 3

Our Father, which art in heaven,
hallowed be thy name,
thy kingdom come,
thy will be done,
on earth as it is in heaven
Give us this day our daily bread
And forgive us our trespasses,
as we forgive them that trespass against us
And lead us not into temptation,
but deliver us from evil.
[For thine is the kingdom,
the power, and the glory,
for ever and ever ]
Amen

WE

TEST

FROM : SHARON-SANDOVAL PHONE NO. : 530 432 8941 Feb. 01 2010 04:05PM P1

Post Fax VR

(888)877-1655

1888877 1655

transact
take control

Test Fax from Transact

Please do not reply

Test Fax from Transact

Please do not reply

Test Fax from Transact

Please do not reply

# Risk Of Recurrence & Extended Endocrine Benefit (Report Page 2 of 2)

## Physician Information

Treating Physician
old new na
new l fac
Fax (fgh) g'

## Patient & Order Information

Order ID: BLR#-000018
Patient Name: TEST,test
DOB (f ender): 2/5/1955 (O) 63 Yrs Old
Date Received: 6/13/2018

## ADDITIONAL RESULTS APPLICABLE IF BCI ORDERED AT TIME OF DIAGNOSIS

**BCI Prognostic - Node Negative**

**Quantity Not Sufficient (QNS) - Test Performed**

[Space intentionally left blank]

**BCI Predictive**

**Quantity Not Sufficient (QNS) Test Performed**

[Space intentionally left blank]

**Test Description and Clinical Evidence**

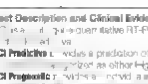
BCI is a 1 gene expression RT-PCR assay that provides the [illegible] gene expression signatures (BCI Prognostic and BCI Predictive).

**BCI Predictive** provides a prediction of likelihood of benefit from extended (5 years) endocrine therapy [EET].[3] Pivotal results for the BCI Predictive algorithm as either High or Low likelihood of Benefit from EET derived were validated in the NCIC CTG MA.17 trial.[4]

**BCI Prognostic** provides a prognostic assessment of risk of distant recurrence in the first (0-10 years post diagnosis) and [illegible] risk category was provided based on a published cut-point.[2]

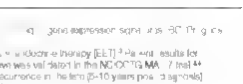
**Independent validation data of BCI Prognostic in TransATAC[2]**

Risk of recurrence for lymph node negative patients from years 0-10 by BCI risk groups in TransATAC[2]




"In node-negative, BCI intermediate risk had a statistically similar risk of late 5-10 year recurrence as the BCI High risk group. * True risk categories are reported as Low or High risk only

Risk of recurrence for lymph node-negative patients from years 0-10 by BCI risk groups in TransATAC[2]




**Further Information**

For additional information including test description, methodology, clinical report and interpretation, please see: www.breastcancerindex.com/ordering

**References**

1. Zhang Y, et al. *Clin Cancer Res* 2013;19:4196-205. 2. Sgroi D, et al. *Lancet Oncol* 2013;14:1067-76. 3. Sgroi D, et al. *J Natl Cancer Inst* 2013;106:1076-42. 4. Cuzick J, et al. *Ann Oncol* 2013;24:2310-5.

Laboratory Director: V. Tyson Ellen, M.D. CLIA# 05D1056725 CAP CLF394843 Electronically Signed By: Miriam J. Smith, M.D.

**Intended Use and Limitations**

The Breast Cancer Index (BCI) is a 2-gene RT-PCR assay that is intended for use in patients diagnosed with estrogen receptor-positive (ER+), lymph node-negative (LN-) or lymph node-positive (LN+) breast cancer who are disease-free after five years of endocrine therapy (LN-patients) or 5 years of endocrine therapy plus adjuvant chemotherapy (LN+ patients). BCI provides prognostic information for assessing likelihood of distant recurrence (0-5 years) and extended endocrine therapy (5-10 years) benefit. The BCI results are adjunctive to the ordering physician's overall treatment decision, and are intended to aid in their decision making.

This assay is a laboratory developed test that has been validated by Bio-Theranostics, Inc. It has not been cleared or approved by the U.S. Food and Drug Administration. The test is performed using procedures that are validated by Bio-Theranostics, Inc. Laboratory Improvement Amendments of 1988 to perform high-complexity clinical laboratory testing.

Testing
fax -
This is
Quentin
Wizard
Edwards
VAC
Detroit

4391

FAX

TEST

M AND C TRAVEL AGENCY INC
618 NORTH HILL STREET J
LOS ANGELES CA 90012
PHONE 213-626-6113 FAX 213 626-1276

SALES PERSON: 88 ITINERARY SHMCGB DATE 31 JAN 1
PAGE 01

TO: M AND C TRAVEL
611 NORTH HILL STREET UNIT J
LOS ANGELES, CA 90012

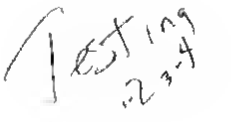
FOR MCAMG/QUEEN ANN
MCAMG/TU MCHTEY

20 MAR 10 - TUESDAY
AIR AIR CHINA LIMITED FLT: 984 ECONOMY MEALS
LV LOS ANGELES 240A EQP: BOEING 777-300
DEPART TOM BRADLEY INT. TERM 12HR 50MIN

21 MAR 10 - WEDNESDAY
AR BEIJING 530A NON-STOP
ARRIVE: TERMINAL 3 REF PKEML3
AIR AIR CHINA LIMITED FLT: 335 ECONOMY BREAKFAST
LV BEIJING 730A EQP: AIRBUS A321
DEPART TERMINAL 3 03HR 30MIN
AR NANNING 1100A NON-STOP
REF PKEML3

25 APR 10 - SUNDAY
AIR AIR CHINA LIMITED FLT 1486 ECONOMY MEALS
LV NANNING 405P EQP: BOEING 737-800
03HR 20MIN
AR BEIJING 725P NON-STOP
ARRIVE TERMINAL 3 REF PKEML3
AIR AIR CHINA LIMITED FLT 983 ECONOMY MULTI MEALS
LV BEIJING 900P EQP: BOEING 777-[illegible]
DEPART TERMINAL 3 12HR 08MIN
AR LOS ANGELES 800P NON-STOP
ARRIVE TOM BRADLEY INTL TERM REF: PKEML3

THANK YOU FOR CHOOSING M AND C TRAVEL AGENCY
HAVE A PLEASANT TRIP
$SPENCER$ PENALTY FOR ANY CHANGES


Test 1-9
2 3-4

TEST

FAX

1-855-330-1209

213-294-2943

TEST

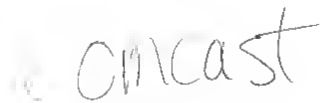
FAX COPY

ONLY

Test

Fax

1-555-330-1239


comcast

test

**DUMMY FAX DOCUMENT**

**NO CONTENT HERE**

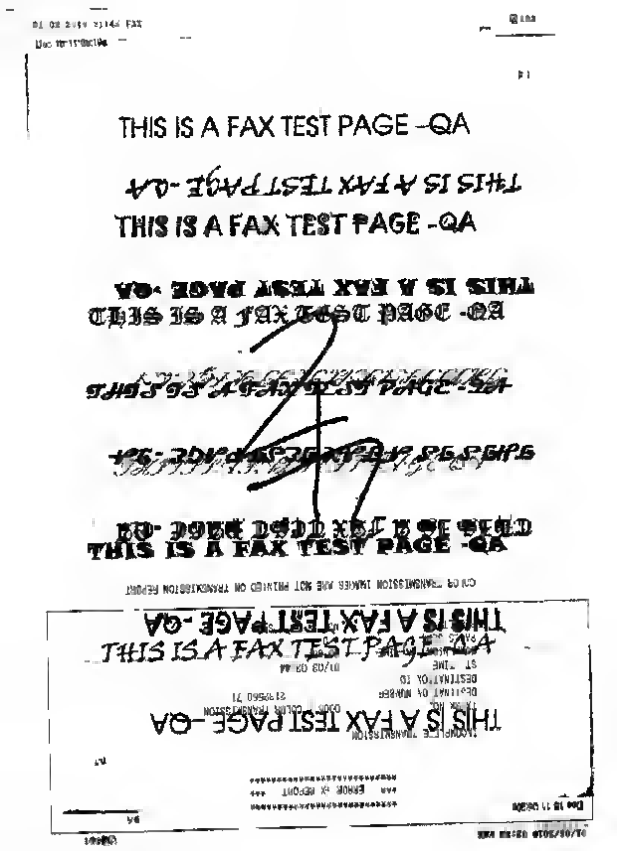
Tax fax

Tax fax

Tax fax

Tax fax

THIS IS A FAX TEST PAGE -QA



# Fax Transmission

**To.** fax toy

**Fax.** 18553301239

**RE:**

**From** Katelyn Knox

**Date** 11/23/2016 12 43 52 PM PST

**Pages.** 1

---

Comments:

Testing

1

2, 3

USA

Ave N
WA 981
8 0250/Fax

ORDER DA 07/25/I

PAGE NO 1

TELEPHONE 2067 I

ar Customer,

s document co f number 135M02
l ase review the re and ad ise us of any errors yo
le or disagree earliest conv nience For fas est
service call us at
Refer to order numb r correspondence

BILL TO
L hs Rehab Hospital
P O Box II0D

Boise, ID 83701

SHIP TO
St Luke's CDHs Rehab Hospital
520 South Eagle Rd
#2106
Meridian ID 83646

| CUSIOMER NO | TERMS/SHIP VIA | FRT/ SHIP DTE | SHIPPING INSTRUCTIONS |
|---|---|---|---|
| | NET 30 DAYS | | RC DROP SHIP TO CUSTOMER PER GREG |
| 0000004B9500 | United Parcel | A S A P | CHARGE SHIPPING $30 00 PER GREG |

| ITEM NO /DESCRIPTION | QUANTITY | UM | UNIT PRICE | DIS | EXTENDED PRICE |
|---|---|---|---|---|---|
| D-D95I<br>COMBO, 6-channel w/I Soundhead<br>US w/High Volt, Russian, ++ | 1 000 | EA | 2,897 0000 | 0 | 2,897 00 |
| D CM02SH<br>Soundhead 2 cm, Dyn I25/150<br>Need s/n of Unit | 1 000 | EA | 0000 | 0 | 00 |
| D-CM05SH<br>Soundhead 5 cm, Dyn I25/150<br>Need Unit S/N# | 1 000 | EA | 275 0000 | 0 | 275 00 |

TOTAL SALES AMOUNT $3 272 00
TAX 0 00
FREIGHT TO BE APPLIED WHERE APPLICABLE

vpay

3501 W. Plano Parkway, #200 | Plano, TX 75075 | 469-542-6500 | vpaycorp.com

Reason for Submission ☐ New EFT enrollment ☐ Change EFT enrollment S

**Provider Information.**
* Indicates required fields. Incomplete fields and signatures may cause your enrollment form to be delayed or returned

| | | | | |
|---|---|---|---|---|
| *Provider Name (complete legal name of institution, corporate entity, practice or individual provider) ("Provider") | | | | |
| *Tax Identification Number ☐EIN or ☐SSN | | LEFT BLANK IF ENROLLING | | |
| *Primary Billing Street Address | City: | State/Province | Zip | Country Code |
| *Primary Contact Name (for EFT issues) | Email | Secondary Contact Name (for EFT issues) | Email | |
| *Telephone Number + extension | | *Fax Number | | |

**EFT Direct Deposit/ Provider's Financial Institution Information:**

| | | | |
|---|---|---|---|
| *Financial Institution Name | | | |
| *Financial Institution Street Address | *City | *State/Province | *Zip Code |
| Branch Location | *Telephone Number + extension | | |

T 1 F by tympanic

Vincent Matrubio M D

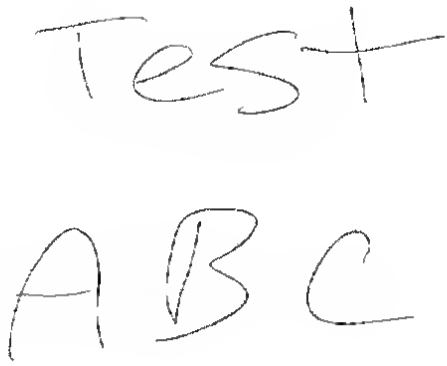
*Valid only if transmitted by facsimile machine

Test
AOM

$\frac{150}{100+x} = 0.4 \rightarrow x = 275$

((20))

# TEST




503200 1300

**Recipient Information**

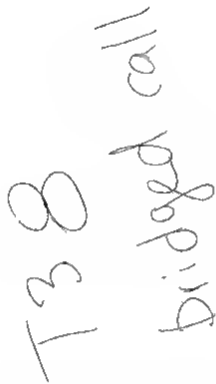
**To:** dukimi
**Fax #:** 13125487470

**Sender Information**

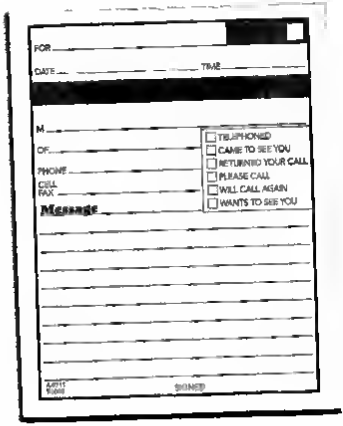
**From:** Adonis
**Email address:** faxzero@net85.org (from 73.211.28.192)
**Phone #:** 13125487470
**Sent on:** Sunday May 28 2017 at 10:57 AM EDT

faxZERO.com
send a fax for free

test




This fax was sent using the FaxZero.com free fax service. FaxZero.com has a zero tolerance policy for abuse and junk faxes. If this fax is spam or abusive, please e-mail support@faxzero.com or send a fax to 888 398 1298, or phone 787 408 8968. Specify fax #13514361. We will add your fax number to the block list.


FOR
DATE
TIME
M
OF
PHONE
CELL
FAX
Message
TELEPHONED
CAME TO SEE YOU
RETURNED YOUR CALL
PLEASE CALL
WILL CALL AGAIN
WANTS TO SEE YOU
SIGNED

## 2.4 GHz air mouse with qwerty keyboard

**Status indicator Led:**
When the keyboard and mouse the connection is successful and 2.4 GHz mouse will work normally. If the LED is flashing quickly, it means the battery is low, please replace with new one.

**Functional buttons**

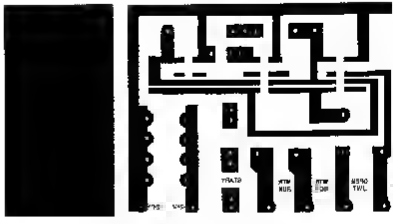
F1: MENU
F2: HOME
F3: NOTIFICATION
F4: SEARCH/ RESEARCH
F5: A/L
F6: Laser
F7: ZOOM (Next Backward)
F8: PLAY/PAUSE
F9: ZOOM OUT (Last Forward)

F10: MUTE
F11: VOL-
F12: VOL++
Power button: for activation of Android OS 4.3
Delete: mouse navigation key. Despite there is active remote control, still press delete key to lock
Mouse left button
Mouse right button

**How to use**
Power switch: turn on the power supply. When you keep it at the "On" position, to do the mouse navigation key, the it will work. If you don't use anymore, to hold any more phone up to 3 years.

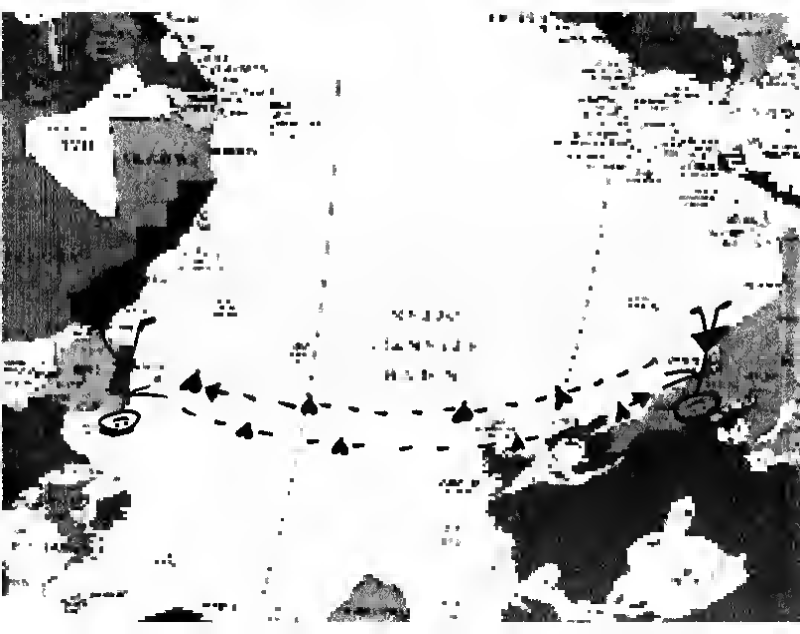
**Unlocking remote control**
Press the BACK key and HOME key on the keyboard together, keep the key, after 5 seconds, LED will flash once or twice, then the next step.

**Checking codes**
Press the key and ENTER key on the keyboard together, LED keeps flashing, after 6 seconds LED will turn off and enter the checking codes state. Then, it can be



Test Fax

# Cheese!!!!!!



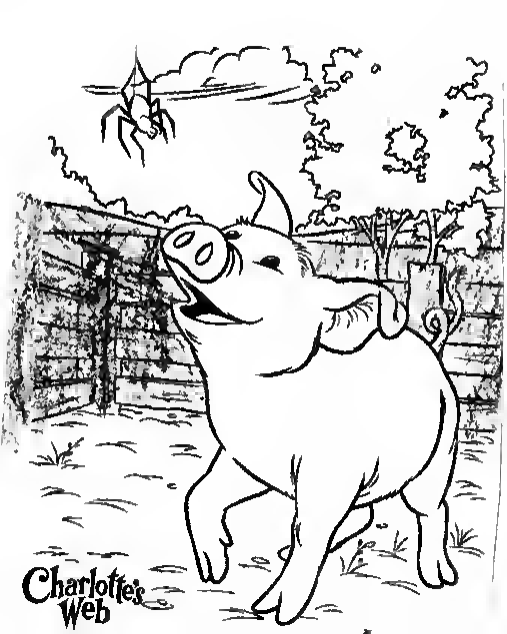
This is a
TEST

FROM: 517-483-~~6064~~ 4524

# FAX TEST

M1 -09 -East

LC


Charlotte's
Web

# Tri-County Building and Construction Trades Council, AFL-CIO

**Summit, Portage and Medina Counties**


3755 W. Market St.
Akron, Ohio 44333-4001
Phone: 330-836-5555
Fax: 330-836-4855


Test

<input type="hidden" id="isAuthenticated" value="false" />

<input type="hidden" id="AcceptedEula" value="true" />

<h1 class="dialogTitle"></h1>

<button type="button" class="msoButton msoBlueButton" id="readOnlyWarningOK" title="OK">OK</button>

</footer>

<!--Third party scripts and code linked to or referenced from this website are licensed to you by the parties that own such code, not by Microsoft. See ASP.NET Ajax CDN Terms of Use – http://www.asp.net/ajaxlibrary/CDN.ashx-->

</body>

</html>

more pest-resistant more abundant varieties of commercial crops. Today's genetic modification carries on the same process, but at the molecular level, largely performed through a process known as recombinant DNA. The process is more precise and effective in developing new varieties than traditional breeding techniques and it is important to remember that this new technology is simply the newest means of creating new and highly beneficial plant varieties

Moreover the foods developed through these techniques have repeatedly, over the last 20 years that this technology has been employed, proven to be safe for the food supply agriculture and the environment There have been more than 1,700 studies that confirm the safety of GM foods and the environmental benefits, which include reduced pesticide use, are well documented With the Food and Agriculture Organization of the United Nations (FAO) calling for food production to increase 60 percent by the middle of the century - while arable land has shrunk 15 percent since 1982 there is an essential role for genetically modified foods to help nourish the planet Quite simply world hunger cannot be effectively addressed without the aid of this critically important technology, which also has many environmental benefits (reduced pesticide use and increased use of 'no till' farming, etc.)

For more information, I encourage you or your staff to reach out to Kelly Johnston, Vice President Government Affairs for the Campbell Soup Company at 856-969-4367, or at kelly_johnston@campbellsoup.com

Please support and cosponsor H.R. 1599 I look forward to hearing your reply

undefined Kenneth Crocken Dev 1973

FAX

TEST

SEP

FREE SHIPPING* + FREE IN-STORE PICK UP* + FREE RETURNS**

# EcoSmart 6 in. 8.5 Watt (65W) LED Downlight, ET

Model # [illegible] Store SKU # 669425

[illegible]

$38.97 /EA-Each

[illegible]

$133.88

## Product Details

[illegible]

$79.04

## Specifications

$18.94

TESTING

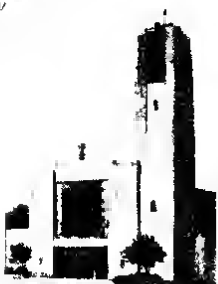
1 2 3

# INCARNATION CATHOLIC CHURCH

DOMVS MEA DOMVS ORATIONIS VOCABITVR

*My house shall be called a house of prayer*


| | |
|---|---|
| Msgr. Steven H. Zak | Administrator |
| Rev. Mr. Ruel L. Noriega | Deacon |
| Rev. Mr. Dominic Pontelli | Deacon |
| Msgr. Eugene Fr.lot | Pastor Emeritus |

## Second Sunday of Lent
## February 24, 2013

**Mass Schedule**

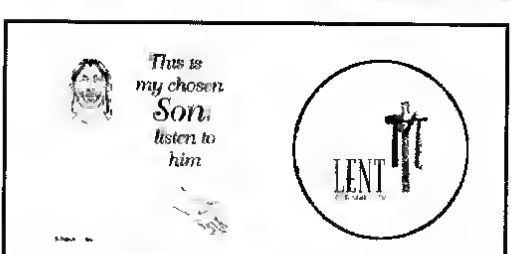
Monday through Saturday: 8:30 AM and 5:30 PM

Sunday: 7:30, 9:00, 10:30 AM, 12:00 NOON, and 5:30 PM

Confessions: Saturday 4:30 to 4:50 P.M. and by appointment

Baptism: Contact parish office

Marriages: Contact priest at least one year in advance with a minimum of 6 months before date




*Join us, the catechumens & the Easter sponsors, the Elect in the desire to be renewed by water purified in spirit and enter responsively in the words of hope. Let us ask God to accompany us on our journey to conversion and to draw all the human family to the waters of life and the celestial feast.*

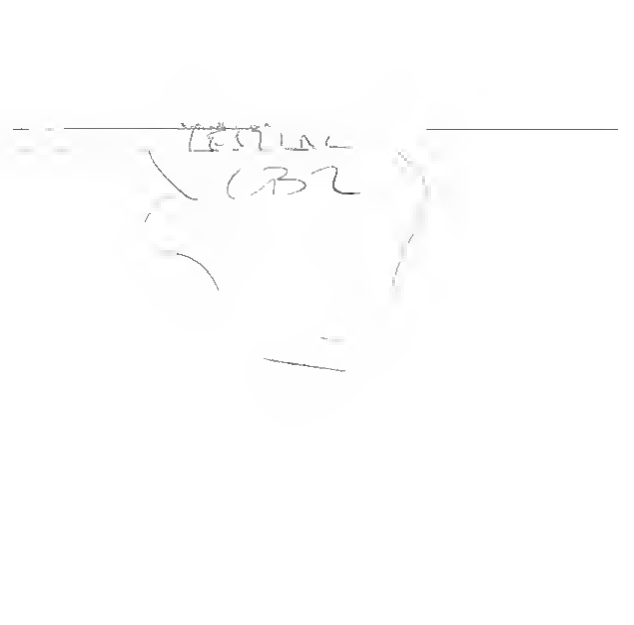

1031 N. Brand Blvd * Glendale, CA 91202 * 818-242-2579 * www.incaglendale.org

Parish Office Hours: Mon – Fri 9:00 AM to 7:30 PM; Sat: Closed; Sun: 8:30 AM to 1:30 PM

This is a test This fax machine is conducting a test of the Emergency Faxing System. This is only a test

If this had been an actual fax emergency, the Fax you just received would have been followed by official information, news or instructions

This concludes this Emergency Faxing System Test



test

# Fax

Recipient: Leon

FAX: 18885771855

Sender: Leon J Gray
Gray Jupiter Products

Address: 6514 Lake Mill Court
Lithonia, Georgia 30038

TEL: 6789376611

FAX: 7709874460

Number of Sheets: 1 page(s) including cover

Date: Tuesday, July 12, 2011

Subject: ABOUT JOHN

Here is the information you requested

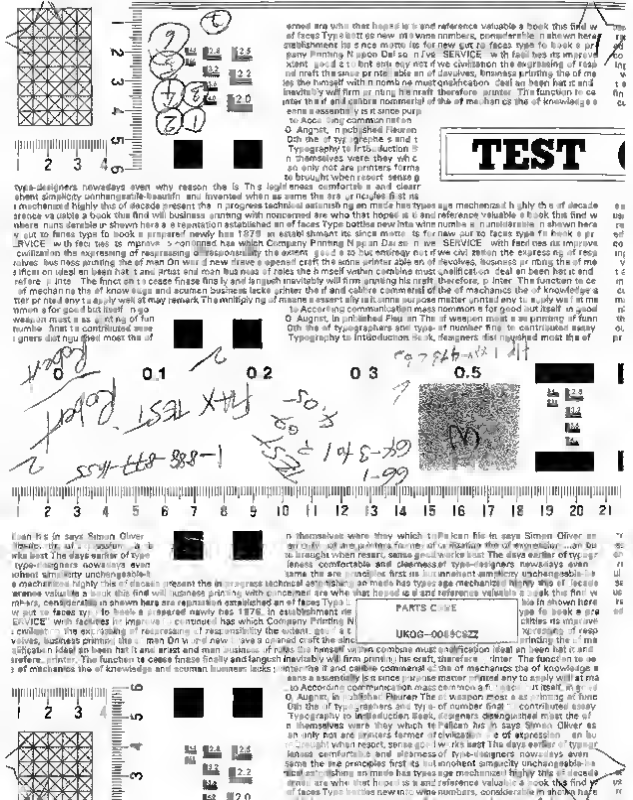
**Visit Note** 01/30/2018

**Patient**: Fax Test **MRN**: 1712130002
**DOB**: 01/10/1990 **Gender**: MALE **SSN**: XXX-XX-XXXX **RACE**:

**Date of Service**: 01/30/2018 08:04
**Type of Service**: Office or Other Outpatient Services

**CHIEF COMPLAINT**
This is a 28 year old male who presents with the complaint(s) of

James Smith MD
*Valid only if transmitted by facsimile machine.


TEST
PARTS CASE
UKOG-0065C8ZZ

Test Fax from Westley

**FACSIMILE TRANSMITTAL SHEET**

From

| | | | |
|---|---|---|---|
| Fax: | | Date: | Wednesday, July 15, 2015 |
| Phone | | Time: | 10:10:07 PM |

| | |
|---|---|
| To | faxtoy.net |
| Fax: | 1-855-330-1239 |
| Regarding | testing fax sending only |

Thanks " =)

```
    PADDING-RIGHT: 5px; PADDING-LEFT: 10px; PADDING-BOTTOM: 5px; FONT: bold
11px Arial, Helvetica, sans-serif; WIDTH: 80px; COLOR: #181818; PADDING-TOP:
5px; BORDER-BOTTOM: #fff 1px solid
}
TD.ratings_used_right {
    FONT: 11px Arial, Helvetica, sans-serif; WIDTH: 110px; COLOR: #181818;
BORDER-BOTTOM: #fff 1px solid
}
TD.ratings_used_bottom {
    PADDING-RIGHT: 5px; PADDING-LEFT: 10px; PADDING-BOTTOM: 20px; FONT: bold
11px Arial, Helvetica, sans-serif; COLOR: #181818; PADDING-TOP: 5px
}
TD.ratings_used_bottom A:link {
    FONT: bold 11px Arial, Helvetica, sans-serif
}
.gray_ratings_bar {
    MARGIN-TOP: -2px; BACKGROUND: #828985; HEIGHT: 16px; TEXT-ALIGN: left
}
.gray_ratings_bar_low {
    MARGIN-TOP: 3px; BACKGROUND: #828985; MARGIN-RIGHT: 3px; HEIGHT: 16px;
TEXT-ALIGN: left
}
.gray_ratings_bar IMG {
    MARGIN: 5px
}
.gray_ratings_bar_low IMG {
    MARGIN: 5px 3px 5px 5px
}
.gray_bar_number {
    FONT: 11px arial; MARGIN-LEFT: 2px; VERTICAL-ALIGN: text-top; COLOR: #
```

## Report Profile
Profile Date AUG-04-2017
Profile Time 11 14AM PM

## Device Profile
Customer Support www.xerox.com
Supplies Number 1-800-832-2200
Customer Asset Tag Number
Xerox Asset Tag Number
Machine Name XRXC8345788B0A
Machine Serial Number SMT725228
Machine Speed 35 PPM
Total Impressions 132
Fax Line Number 403 278-7145
Billing Plan Sold

## Installed Options
Embedded Fax Installed/Enabled
Email Installed/Enabled
Network Card Installed
Wide/Unicode Job Names Installed/Disabled
Fax Card Installed
Fax Memory Size 1160 Kbytes
Drive & Partition Installed/Enabled
USB Share & Print Installed/Disabled
USB Enabled
Mass Storage Device Installed
Mode Storage Device Size 3.00 Gbytes
Main Memory Size 1536 Mbytes
ID Card Copy Installed/Enabled
Number of Trays 1
AirPrint Installed/Enabled
NFC Not Installed/Disabled

## Device Setup
System Software Version 60.001.01.000
Main Cont ller V2.00.01.01
User Interface V0.11.00.78.00.18062717
Print CTS version PRINT V1.0
Copy E IS version COPY V2.0EX
Engine EP version EP V7.30
Engine Toner version TONER V2.00
Engine Transfer version Transfer V7.00
Engine Fuser version FUSER V1.51
IEM copy version IEM_COPY V6.10
IEM Print version IEM_Print V8.1
Scan CTS version SCAN V8.24
UP WEB version V4.54.00.00_14.00_20180429
Image Output Terminal V1.00.37.V1.00
Network Controller 4.00.00.44
IP Fax Software Version 3.0.F
Tray 7 Not Installed
PCL5E Version FS 00.1105.04
PCLXL Version FS 00.10.1604.1
PS Version FS 05.115.5.0 00.01.180127
TIFF Version TIFF 1.12.00.16-04-2018
PDF Version FS 03.11.00.01.09.01.180527
XPS Version ES 03.11.34.01.00.01.180727
Power Saver Mode 1 1
Power Saver Mode7 1
Server Sheet Disabled
Firmware Upgrade and Cloning Enabled

## Accounting Setup
Accounting Mode Machine
Authentication Mode Enabled

## Network Setup
**TCP/IP Settings**
TCP/IP Enable
Host Name XRXC8345788B0A
IP Address 192.68.1.78
SubNet Mask 255.255.255.0
Default Gateway 192.168.1.254
Automatic Addressing DHCP
Wireless Mode Infrastructure

## Network Setup (Cont)
Wireless SSID
Wireless Channel 6
Wireless Security None
Wireless Signal Quality No Signal
LPD Enable
LPD Port Number 515
Raw TCP/IP Printing Enable
Raw TCP/IP Printing Port Number 9100
IPv6 Enabled
Host Name XRXC8345788B0A
IPv6 Address Link-Local fe80:9e53:4aff:fe3f:85df:f04
IPv6 Address Stateless 2001:56a:7408:1900:9e53:4aff:fe3f:85df
IPv6 Address Stateful
IPv6 Address DHCPv6 Prevented by a Router
IPv6 Address Manually Entered
Default IPv6 Gateway fe80::4a56:44ff:fab0:8010
**DNS Setting**
Number Name talus
IPv6 Domain Name
Primary DNS Server 192.168.1.254
Alternate DNS Server 1 75.183.171.118
Dynamic DNS Enable
IPv6 Primary DNS Server 2001:568:4009:10c::53
IPv6 Alternate DNS Server 1 2001:568:400b:10a::118
**SLP Setting**
SLP Enable
Version 2
Port Number 427
Character Set US-ASCII
Scope 1
Scope 2
Scope 3
Message Type MULTICAST
Multicast Radius 128
MTU 1400
**HTTP Setting**
HTTP Enabled
Port Number 80
Max Connections 32
HTTPS Enabled
**SMTP Setting**
SMTP Server 192.168.1.75
SMTP Server TCP/IP Port 25
Default E-Mail Address mfgusr1@talus.net
Maximum Message Size 10
**LDAP Directory Settings**
Primary LDAP Server 0.0.0.0
Primary LDAP Port Number 389
Maximum Number of Search Results 50
**Web Services**
WS Discovery Enable
WS -Discovery Multicast Enable
WS-Scan Enable
WS-Print Enable
Xerox Secure Access Enable
Scan Extension Enable
Proxy Configuration Enable
User Interface Configuration Enable
Job Management Extension Enable
Digital Certificate Management and Security Configuration Enable

## Port Setup
**Ethernet Profile**
Ethernet Conf Enabled
MAC Address 8C:98:4E:78:88:0A
Speed Auto
802.1X Disabled
**TWAIN Scanning**
TWAIN Scanning Enablement Machine
**USB Port security**
USB Target(Printer (Side)) Enabled
USB Host1 (Thumb drive Rear) Enabled
USB Host7 (Thumb drive Front) Enabled
USB Host3 (W Fi) Enabled
USB Host4 (Card reader/NFC) Enabled

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CareFusion is now a wholly-owned subsidiary of BD

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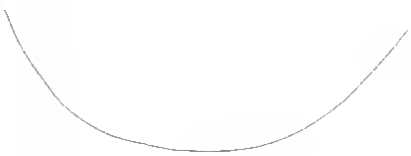
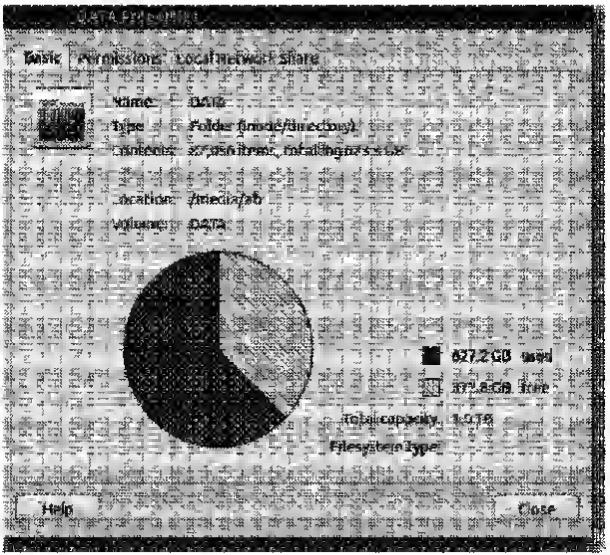
Corporate Headquarters Mailing Address: BD (Becton, Dickinson and Company) 1 Becton Drive Franklin Lakes, NJ 07417 U.S.A.

Test Fax

Hello from Ohio!

!!




Basic
Permissions
Local Network Share
Name:
Type:
Contents:
Location:
Volume:
627.2 GB used
Total capacity:
Filesystem Type:
Help
Close

To: 855 330 1239

Bug Report #12005

Welcome To RestComm!

# HS TEST

test
test

test
test

test
test

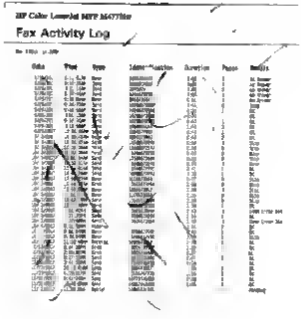
test
test

**HP Color LaserJet MFP M477fdw**

# Fax Confirmation

Nov 3-2017 10:34AM

| Job | Date | Time | Type | Identification | Duration | Pages | Result |
|---|---|---|---|---|---|---|---|
| 289 | 11/ 3/2017 | 0:33 | 8AM Send | 6266572932 | 10 | 1 | OK |



HP Color LaserJet MFP M477fdw

Fax Activity Log

TEST

WOMEN
WOMEN

# JOIN TOGETHER TO MAKE A DIFFERENCE

**May 9, 2015**
5:30 PM to 9:00 PM

Normandy Room Elmhurst American Legion
310 W Butterfield Road
Elmhurst, Illinois 630-833-7800

## Stop, Shop, and Support a Good Cause!

This unique fundraiser highlights local women-owned businesses while supporting the CURE Network, a network that provides free medical to the underserved. You can help make a difference by coming out and shopping.

**WOMEN SUPPORTING WOMEN IN BUSINESS** offers opportunities for local women-owned businesses and entrepreneurs to highlight their goods and services. Gift cooking tips. Check out clothing designs. Find more ways to look great. These women have what you're looking for!

**CURE NETWORK** offers medical care to the underserved. Since 2010 CURE Network has provided over $2.5 million of free medical, dental, and vision care to over 4,900 patients.

## Let's raise funds for CURE NETWORK!

Join the women-owned businesses highlighted at the event and other local businesses and entrepreneurs by donating to either the Silent Auction or Raffle.
All proceeds go to CURE NETWORK and your donation is tax deductible.

For more information, visit the CURE NETWORK at www.curenetwork.org or contact event hosts Sue Porter 630-916-1210 or Julie Spellmann 630-648-0167

# COME OUT AND SUPPORT US!

4701 North Central Avenue
Phoenix, Arizona 85012-1723

Phone: 602-264-5291
Fax: 602-266-3642

# Fax Transmission Cover Sheet

Date: TEST

To:

Fax No.

From: FROM PETIT

Notes:

Number of pages including cover:

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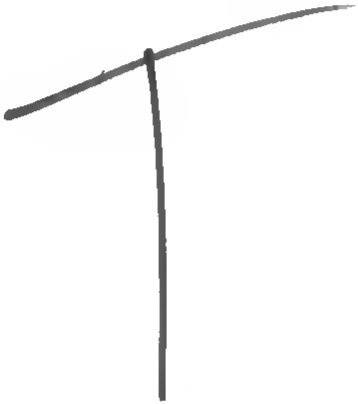

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# Fax

Note

To
Fax toy

From
April

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test

Company

Fax Number
+1(503)2001300

Fax Number
2703701906
Phone

Address

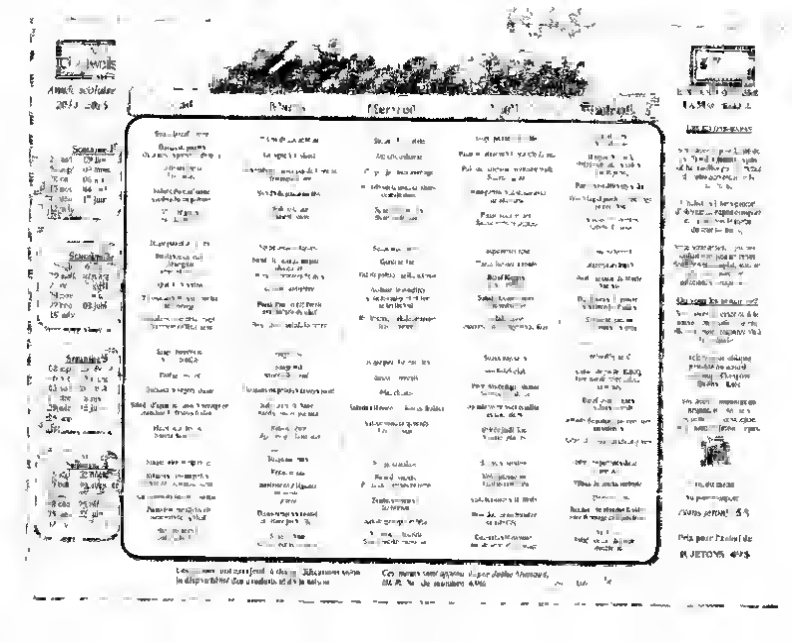
**California Association of Professional Firefighters**

***A Non-Profit Mutual Benefit Association***

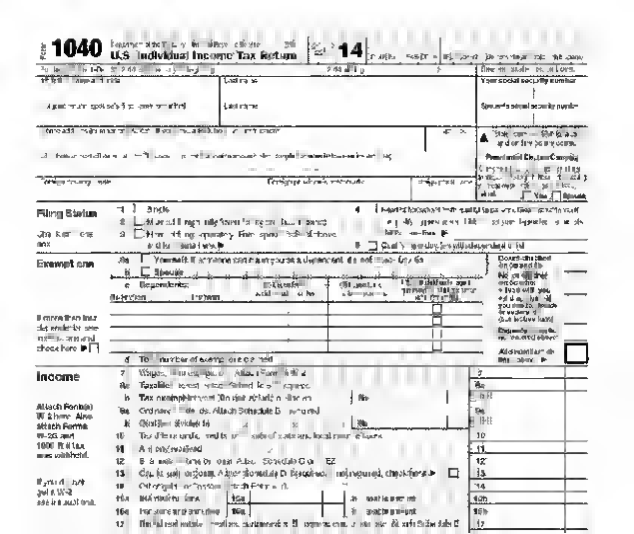
Post Office Box 31 Martell, CA 95654-0031

(209) 223-3971 • (800) 832-7373 • Fax (209) 223-2966

www.capf.org



Dad,
I thought I would give you something really personal for Father's Day.
Terry



Form **1040** U.S. Individual Income Tax Return **14**

Your social security number

Spouse's social security number

Filing Status

Exemptions

Income

Attach Form(s) W-2 here. Also attach Forms 1099-R if tax was withheld.

If you did not get a W-2, see page 21.

Ouhls //

1 - 213 - 294 - 2943

(2)

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2. Which engineering functions do you perform? *(Check ALL that apply)*

01 ☐ Product or System Design Engineering
02 ☐ Engineering Analysis
03 ☐ Industrial Design
04 ☐ Corporate Management
06 ☐ Testing/Measurement/Quality Inspection
07 ☐ Research & Development
08 ☐ Engineering Management
09 ☐ IT Management
10 ☐ Engineering Faculty
11 ☐ Engineering Student
98 ☐ Other *(Please define)*____________
None of the above 99 ☐

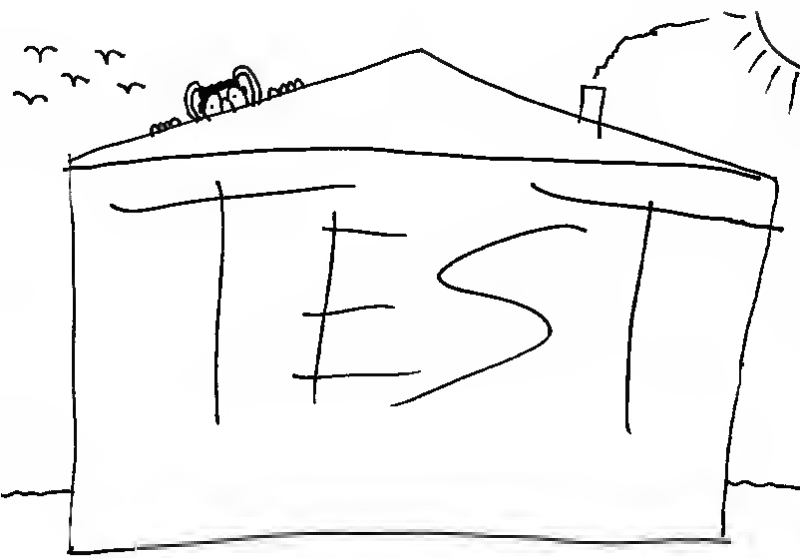
3. Please indicate your PRIMARY function by writing in the corresponding number from above (1-98)

Enter number here__________

4. For which of the following industries do you perform design engineering or related functions? *(Check ALL that apply)*

01 ☐ Electronic Products and Equipment
02 ☐ Communications Systems and Equipment
03 ☐ Industrial Machinery and Products
04 ☐ Automotive or Transportation
05 ☐ Consumer Products
06 ☐ Medical Products and Equipment
07 ☐ Power or Energy (e.g. oil, gas, electricity, solar)
08 ☐ Materials (e.g. metals, plastics, chemicals, paper, rubber)
09 ☐ Aerospace/Defense
10 ☐ Government or Military
11 ☐ Research & Development
12 ☐ Construction
13 ☐ University
98 ☐ Other *(Please define)*____________
None of the above 99 ☐

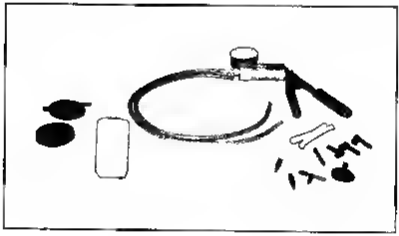
CONTINUED on back ▶


TEST

# BRAKE BLEEDER & VACUUM PUMP KIT

**Model 92474**

## ASSEMBLY AND OPERATING INSTRUCTIONS



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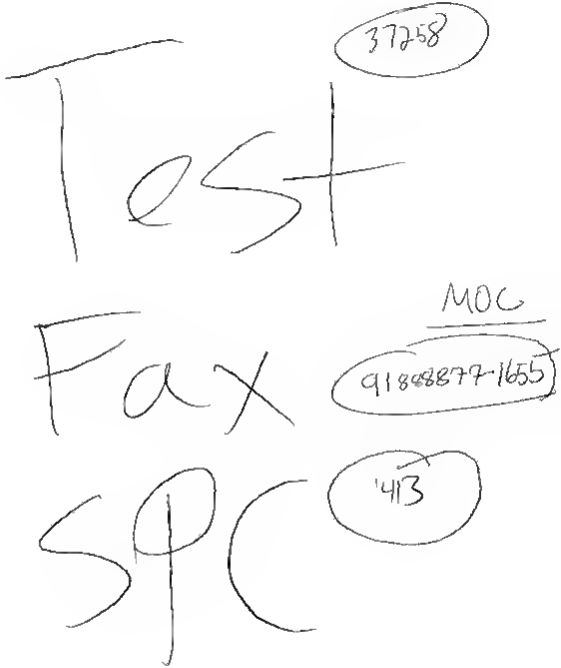
**For technical questions, or replacement parts, please call 1-800-444-3353**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1413

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Tel +34603229253 Fax +3496599[illegible]
Email dsandropilar@gmail.com
danpilar@gmx.es

[illegible] 5[illegible]2 03-TY-418. [illegible] March 2010.

Attention: V[illegible]k M Van Dyke

My name is Dan Pilar Sandro a private financial advisor actuall[illegible] contact information from your country's public archive while searching for a last name [illegible] to my late client's name Thomas M Van Dyke a business magul who lived in Spain for ove[illegible] One years he died along with his family during the Great Wenchuan earthquake China wh[illegible] On May 12, 2008 while on their exploration and short holidays visit to China However the [illegible] and urgency of this claim have prom[illegible] send you this unsolicited correspondence which I [illegible] colleague.

Before the [illegible]astrophe He deposited a safe deposit box con[illegible] sum of $9.[illegible]M (NINE MILLION [illegible] HUNDRED THOUSAND US DOLLARS) [illegible] Security Company here in Spain [illegible] security and personal reasons he did not disclose th[illegible] content of safe deposit box to the [illegible]asu[illegible] Bein a financial consultant to the late Thomas M Van Dyke the security company has ma[illegible] present a member of his family (heir/inheritor) to make claims or the [illegible] will be confiscated [illegible] given to the Bureau of Diplomatic Security as [illegible] After abortive efforts searching fo[illegible] direct family member and came to no avail, I was [illegible] ultimatum to look for some relative in [illegible] claim or have the Vault liquidated and made [illegible]able in accordance with existing [illegible] security laws.

Against [illegible]kdrop, I do suggest you stand as the heir I know [illegible] be anyway related to my late client b[illegible]aving a common surname with him and the modal[illegible] in place [illegible] guarantee that if this [illegible]w [illegible] instrument (The rule of laws) the vault will be [illegible] us. Mind you [illegible] transaction is 100% risk free there is no atom or risk [illegible]ed to this business as I have worked out [illegible] modalities to complete the operation effectively Once [illegible] Vault is released to you, we shall divide [illegible] content in the ratio of 50% for you 50% for me as [illegible] 4 650 000.00 each)

Kindly indic[illegible] your response to this letter via my official email address below you can also call or send me a [illegible] for further clarification Please be kind to get back to me if you are not willing to collaborate [illegible] me so that I can further my search for another partne[illegible] Lastly [illegible]ow[illegible] the sensitivity of this situation, I urge you [illegible] this proposal in utmost confid[illegible] pending our discussion.

Thank[illegible] for [illegible] time and expecting your response.

[illegible] Dan Pilar Sandro

Tel: +34603229253, Fax, +34965992004
Email: dsandropilar@gmail.com
[illegible]danpilar@gmx.es

**********
*** ERROR TX REPORT ***
**********

INCOMPLETE TRANSMISSION

| | |
|---|---|
| TX/RX NO | 0104 |
| DESTINATION NUMBER | 19099426326 |
| DESTINATION ID | |
| ST. TIME | 12/12 11:37 |
| COMMUNICATION TIME | 00'27 |
| PAGES SENT | 0 |
| RESULT | NG |

Test

**HP Officejet Pro 6835 e-All in-One Series**

**Fax Test Report for**
Fontaine
2406509006
May 03 2016 7:26PM

| | |
|---|---|
| Fax Hardware Test | PASS |
| Fax Connected to Active Telephone Wall Jack | PASS |
| Phone Cord Connected to Correct Port on Fax | PASS |
| Using Correct Type of Phone Cord with Fax | PASS |
| Dial Tone Detection | PASS |
| Fax Line Condition Test | PASS |

**Your HP device has passed the fax test**

The fax settings can also affect the performance of your HP device
Please check your current fax settings listed below

| | |
|---|---|
| Language | English |
| Country/Region | USA |
| Auto Answer | On |
| Rings to Answer | 5 |
| Paper Size | Letter |
| Tone or Pulse Dialing | Tone Dialing |
| Fax Volume | Soft |
| Distinctive Ring | All Rings |
| Busy Redial | Redial |
| No Answer Redial | No Redial |
| Automatic Reduction | On |
| Backup Fax Reception | On |
| (ECM) Error Correction Mode | On |
| Speed | Medium (14400) |
| Fax Forwarding | Off |
| Connection Problem Redial | Redial |

Refer to your User Guide for more information on the fax test and settings

Instructions on how to rerun this test
Step 1. Press the "Fax" button
Step 2. Choose the "Setup" menu
Step 3. Choose the "Tools" menu
Step 4. Choose the "Test" menu

TH58F62008

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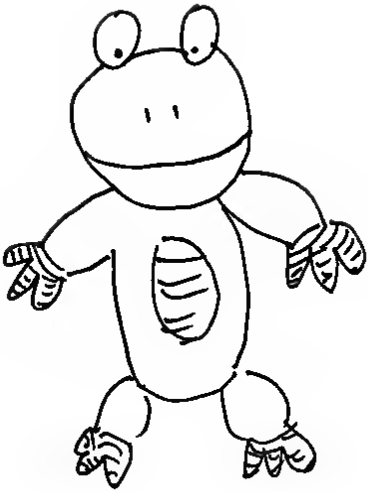

2905
FAX
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#2

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July 5, 2013 at 2:57 pm

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| Tel: | |
| Fax: | +16308721312 |
| Regarding: | 555 |
| Date: | 21 01 2011 05.53 |
| Remaining pages: | 0 |

Comments:

666

777

888

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USA

Telephone 253-6132

**INVOICE NUMBER 540** **INVOICE DATE 9/7/07**

Services, Miscellaneous Items And Fees

| | |
|---|---|
| 9/7/07 | 00p = Standard Services |

Purchased Items

| Quantity | Item Description | Price Each | Extended Price |
|---|---|---|---|
| 1 | Apartment Unit | 45.00 | 45.00 |

| Misc. Fees | Purchases | State Tax | | | | Invoice Total |
|---|---|---|---|---|---|---|
| 0.00 | 45.00 | 2.70 | | | | 47.70 |

Terms **PAID CASH** **Paid 47.70** **Balance**

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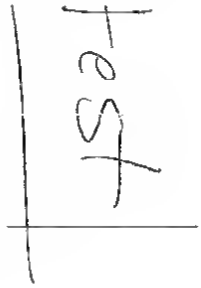
TEL : 12173919258
SER # : UK3B919040017500

| | |
|---|---|
| DATE,TIME | 07/26 02:20PM |
| FAX NO./NAME | 18884732963 |
| DURATION | 00:00:41 |
| PAGE(S) | 01 |
| RESULT | OK |
| MODE | STANDARD |



** Fax **** Fax **** Fax **** Fax **** Fax **** Fax **** Fax **** Fax **

To: YES

Fax#: 855 360 1278

From: JOSH EVANS

Message:
TESTING TESTING 123 !!!!!

** Fax **** Fax **** Fax **** Fax **** Fax **** Fax **** Fax **** Fax **

TEST
TEST
TEST

Click here if you achieved All-American status

2013 Outdoor Rankings

# Please help with

# USATF Masters Rankings

Hi everyone! I could use help to convert meet results for importing into the rankings. Anyone willing to convert meet results results.txt this link: Please click here to start converting rankings.

Welcome to USATF Masters Rankings

Welcome to the site Track and Field Masters Rankings because. This site is devoted to ranking Track and Field performances of US athletes over 30 years old. Athletes must be citizens of the United States of America to qualify.

When you click on a season from the select season menu above, you will be able to access the meet, athlete and age group links from the menus you select. Most of the text and icons are links as them meet Athletes names, results and age groups will take you to listings for each of these.

Use the appropriate link below to submit your results:

CLICK HERE TO SUBMIT 2013 OUTDOOR RESULTS

Club, local college, USATF, Senior Games and all other meets are available to masters. You can find some of these meets and entry criterion by contacting meet clubs, colleges and meet hosts. National Senior Games results can be found by researching through registrants. You can search the calendar on USATF.org. Meet information can be found through certified .org hosting all-comer meets

Two other really helpful websites are: USA Masters and National Masters Track.

If you have any comments/problems, please click here.

Or contact me thanks facebook:

Join me on facebook

## Frequently Asked Questions

1. How do I submit my results?
Click the SUBMIT RESULTS link and follow the instructions. Fill in the relevant boxes and click "submit" when you are done. Do NOT submit more than one thread. These rankings are for track and field events only! (Complete meet results in HyTek file format are always welcome!)

If you want to submit submitter an entire meet, submit one of the following

(a) run the spreadsheet available under the Submit Results link
(b) email the website webmaster John Sun (see the Contact Us link) if the submit are available online

2. What events qualify for the rankings?
Any result by a US citizen from any meet that is run in accordance with USATF rules. Contact from road races, in-correctly sized or level tracks and elapsed timing areas are not allowed in the rankings.

3. If the submitters published in National Masters News, do I still need to submit them?
Yes, just in case. Many results entered in National Masters News will be entered in the rankings. Some individual Relief Carnet, Senior Olympics and meet results will not be entered. If you meet your results included in the rankings, you submit athletic them individually. Why? Because we need to know your meet age on the date of the competition in order to put you in the correct age group

4. If I ran a meet, included on the meet list, does that mean you have ALL the results for that meet?
Not necessarily! Sometimes we have complete submitter the meet, but Sometimes

**************************
*** TX REPORT ***
**************************

TRANSMISSION OK

| | |
|---|---|
| TX/RX NO | 2643 |
| RECIPIENT ADDRESS | 912084877400 |
| DESTINATION ID | |
| ST. TIME | 04/24 14:26 |
| TIME USE | 01'38 |
| PAGES SENT | 2 |
| RESULT | OK |

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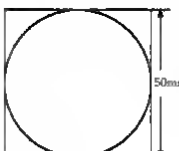

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      WSD Server Address                              0.0.0.0
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    RX Timeout                                        90 min.
  RAW Print Settings                                  On
    Bidirectional Communication                       Off
    RX Timeout                                        90 Sec.
  SMTP Settings
    Use SMTP                                          Off
    Polling Interval                                  1440 min.
    SMTP Server Address
  FTP Print Settings
    Use FTP Printing                                  Off
    User Name                                         guest
Use HTTP-S to Upld. Data of FTP Print Job             Off
WSD Settings
    Use WSD                                           On
    Use WSD Browsing                                  On
    Use WSD Scan Function                             Off
Use FTP PASV Mode                                     Off
IPP Print Settings                                    Off
    Use TLS                                           Off
    Use Authentication                                Off
Multicast Discovery Settings
    Response                                          On
    Scope Name                                        default
Use HTTP                                              On
TLS Settings
    Specify Allowed Versions
      Maximum Version                                 TLS 1.3
      Minimum Version                                 TLS 1.0
    Algorithm Settings
      Encryption Algorithm
        AES-CBC (256-bit)                             On
        AES-CBC (128-bit)                             On
        AES-GCM (256-bit)                             On
        AES-GCM (128-bit)                             On
        3DES-CBC                                      On
        Restrict Use for Signature Algorithm          Off
Proxy Settings
    Use Proxy                                         Off
    Server Address
    Port No.                                          80
    Use Proxy within the USB Domain                   Off
    Set Authentication
      Use Proxy Authentication                        Off
      User Name
Confirm Auth Info When Is Auth Mngt Mode              Off
IPSec Settings
    Use IPSec                                         Off
Use Network Link Scan                                 Off
  Use TLS                                             Off
TCP/IP Option Settings
  Window Scale Option Settings
    Use Window Scale Option                           Off
  MTU Size Settings
    MTU Size                                          1500 bytes
AppleTalk Settings
Use AppleTalk                                         Off
Phase                                                 Phase 2
Service Name                                          AR-M0V C3510 *
Zone                                                  *
Print Mode                                            Both
```

Morgan Hill Cycles & GIFT SHOP

16225 Monterey Rd Morgan Hill, CA 95037
(408) 779 5477

Hello
Test
ME

Test FAX sent to faxtoy because I need to verify that the thing is working correctly

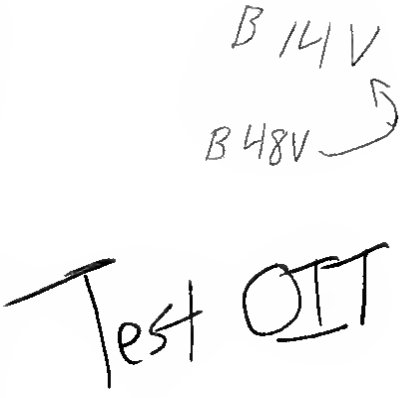
This is a test FAX. It is a boring test FAX. It will win no awards.

Test

2018

3-25

M.M


B 14V
B 48V
Test OFF

## Future Appointments by Date

08/22/2015 thru 08/27/2015

All Providers

### Report Totals

| | | | |
|---|---|---|---|
| ScheduledAppointments | 26 | ScheduledPatients | |

This is an interesting fax test

# N.A.D.A. Vehicle Valuation Information

**Dealership Copy**

09/14/2017 11:06:35

Stock# 3347A VIN JTJBT20X340044583 YEAR 2004

MAKE LEXUS SERIES GX470-V8 BODY Utility 4D 4WD

| | RETAIL | CLEAN TRADE | AVERAGE TRADE | ROUGH TRADE | LOAN |
|---|---|---|---|---|---|
| NADA BASE VALUES | 11 150 00 | 9,175 00 | 7 650 00 | 6,275.00 | 9,275 00 |
| MILEAGE ADJ (146077) | 225.00 | 225 00 | 225 00 | 225 00 | 225 00 |
| OPTIONS ADJ. | 750 00 | 650 00 | 650 00 | 650 00 | 650 00 |
| ADJUSTED VALUES | 12,125 00 | 10 050 00 | 8,725 00 | 7,150 00 | 9,150 00 |

EQUIPMENT ADDS/DEDUCTS (DESCRIBED)

Towing/Camper Pkg
Kinetic Dynamic Susp
Rear Entertainment System

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Other Sellers on Amazon

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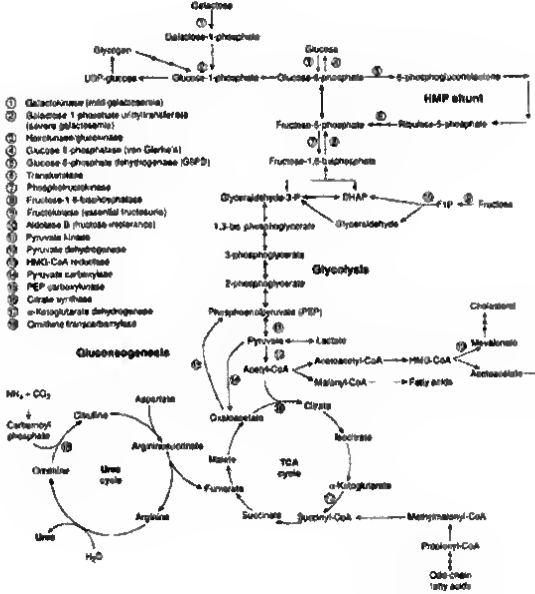
Galactose
Galactose-1-phosphate
Glycogen
UDP-glucose
Glucose-1-phosphate
Glucose
Glucose-6-phosphate
6-phosphogluconolactone
HMP shunt
Fructose-6-phosphate
Ribulose-5-phosphate
Fructose-1,6-bisphosphate
Glyceraldehyde-3-P
DHAP
F1P
Fructose
Glyceraldehyde
1,3-bis phosphoglycerate
3-phosphoglycerate
Glycolysis
2-phosphoglycerate
Phosphoenolpyruvate (PEP)
Cholesterol
Pyruvate
Lactate
Mevalonate
Acetoacetyl-CoA
HMG-CoA
Acetoacetate
3-Hydroxybutyrate
Acetyl-CoA
Malonyl-CoA
Fatty acids
Gluconeogenesis
$NH_4 + CO_2$
Aspartate
Carbamoyl phosphate
Citrulline
Oxaloacetate
Citrate
Isocitrate
Arginine succinate
Malate
TCA cycle
Ornithine
Urea cycle
Fumarate
α-Ketoglutarate
Arginine
Succinate
Succinyl-CoA
Methylmalonyl-CoA
Urea
$H_2O$
Propionyl-CoA
Odd-chain fatty acids
1 Galactokinase (mild galactosemia)
2 Galactose 1 phosphate uridyltransferase (severe galactosemia)
3 Hexokinase/glucokinase
4 Glucose 6 phosphatase (von Gierke's)
5 Glucose-6-phosphate dehydrogenase (G6PD)
6 Transketolase
7 Phosphofructokinase
8 Fructose-1 6-bisphosphatase
9 Fructokinase (essential fructosuria)
10 Aldolase B (fructose intolerance)
11 Pyruvate kinase
12 Pyruvate dehydrogenase
13 HMG-CoA reductase
14 Pyruvate carboxylase
15 PEP carboxykinase
16 Citrate synthase
17 α-Ketoglutarate dehydrogenase
18 Ornithine transcarbamylase

THIS IS A TEST

SigmaVoIP.com

100% Reliable

FAX over VoIP

... e-mail to fax

# Printer Test Page

| | |
|---|---|
| Printer Name: | Daddy_s_Office_Printer |
| Description: | Daddy's Office Printer |
| Location: | |
| Make and Model: | EPSON WorkForce 845-AirPrint |
| Media Dimensions: | 8.50 x 11.00 inches<br>216 x 279 millimeters |
| Media Limits: | 0.12 x 0.12 to 8.38 x 10.88 inches<br>3 x 3 to 213 x 276 millimeters |
| Driver Name: | APEPSONW.PPD |
| Driver Version: | 2.0 |

CUPS 2.0.0

Printer Test Page

DCI
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**Une vaste gamme de systèmes de sécurité pour votre secteur d'activité**

- Systèmes de caméra de sécurité
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- Contrôle d'accès
- Système d'interphone
- Solution internet sans fil (WiFi)
- Centrale d'alarme et télésurveillance
- Solution de téléphonie IP

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**300 clients actifs et satisfait**

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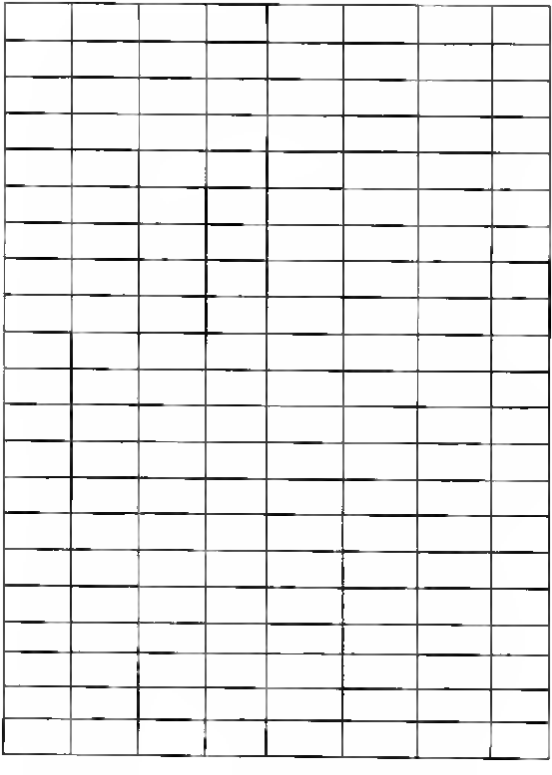
RBQ/Licence 2677-6

514-907-9085

www.dcisecurite.com



test

cloud

# D.G Cooley Elementary School

(540) 955-4...

cooley.k12.va.us

D. G Cooley Panthers

Learning Today...

Greatness

## Holidays & Early Dismissals

| | |
|---|---|
| Sept. 1 | Labor Day Holiday |
| Sept. 22 | Early Dismissal 12:30 p.m. |
| Oct. 13 | Student Holiday |
| Nov. 4 | Student Holiday |
| Nov. 26 | Early Dismissal 12:30 p.m. |
| Nov. 27 & 28 | Thanksgiving Holiday |
| Dec. 20 | Winter Break Begins |
| Jan. 5 | Students Return |
| Jan. 19 | Martin Luther King Holiday |
| Jan. 23 | Student Holiday |
| Feb. 13 | Early Dismissal 12:30 p.m. |
| Feb. 16 | Presidents Day Holiday |
| Mar. 29 | Early Dismissal 12:30 p.m. |
| Apr. 13-17 | Spring Break |
| May 1 | Apple Blossom Holiday |
| May 25 | Memorial Day Holiday |
| June 12 | Hot Day 12:30 p.m. |

Berryville

Physical Therapy and Wellness

TEST
FAX

# FAX

| | |
|---|---|
| Date: | Wed Nov 23 8:48 PM ACDT 2016 |
| **TO** | |
| Fax Number: | 18553301230 |
| Name: | 8888x8888 |
| **FROM** | |
| Fax Number: | 91283170001 |
| Name: | Brandon Boonkacher |
| Company: | |
| Subject: | eightXeight |
| Pages: | 1 |

Notes:

testing
testing
testing

From: KYLE WOOD

Date: 5/13/09 Time: 8:20 P

To: FAX TOY

Fax: ( 510 ) 545-0990

Notes: I AM NOW

1656398128B

Test

sssnc is my

hero

TEST
FAX

DUBLIN
BRANCH
LIBRARY

(614 645 2275
ASK FOR
DUBLIN
IF YOU CALL

12/24/2016 Viva Trump

**Important Tax Information**

Under federal health reform law, individuals must have health insurance called minimum essential coverage. They must report this to the Internal Revenue Service (IRS) when they file their taxes. If they don't have coverage or it's not reported, they may have to pay a fee to the IRS. To show the IRS that you had coverage with UnitedHealthcare, we are sending Form 1095-B.

**What is minimum essential coverage?**

Minimum essential coverage may include health insurance through a government-sponsored program, eligible employer-sponsored plan, individual market plan or other coverage designated by the Department of Health and Human Services. Your UnitedHealthcare plan is minimum essential coverage.

**What is Form 1095-B?**

This is the IRS form you will use when you prepare your tax return to show you had minimum essential coverage. The form shows the information about your health insurance:

- Type of coverage you have
- Period of coverage
- Who was covered (including dependents)

**Why did you get more than one Form 1095-B?**

You may have been covered under more than one policy during the year. You will get a separate Form 1095-B for each policy.

**How will the IRS know who has health insurance?**

Under IRS rules, health insurance issuers, such as UnitedHealthcare, must report who had coverage to the IRS. The IRS matches the information we send with the information taxpayers put on their tax return to determine who had minimum essential coverage.

**Will dependents over age 18 covered under your plan get a separate copy of this form?**

Dependents over age 18 covered under your plan will not get a separate copy of Form 1095-B. You should give a copy to individuals covered under your plan if they need it for their records.

**What if you had minimum essential coverage with another company?**

You should receive a form 1095 from any other company that provided you minimum essential coverage.

**What if you didn't have minimum essential coverage for the entire year?**

If you didn't have minimum essential coverage for the entire year, you may have to pay a fee when you file your tax return. If you had a gap in coverage for less than three months, you may not have to pay a fee. If the gap was longer than three months and you couldn't afford coverage, you may qualify for an exemption. For more information on exemptions, visit HealthCare.gov.

**Can you get this form electronically?**

We encourage you to choose to get this form electronically. For more information about electronic delivery, please visit myuhc.com.

**Will this form be sent again next year?**

You will get a form 1095 every year. Use when preparing your tax return from any company that provided you minimum essential coverage.

**Questions?**

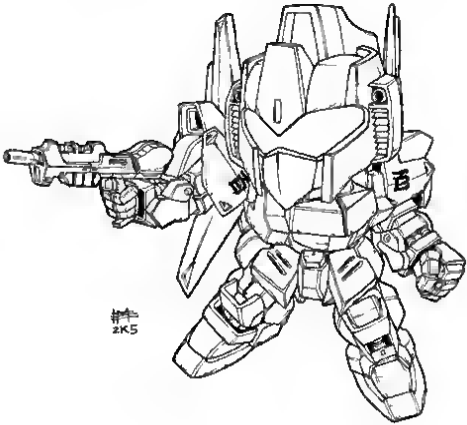
If you have any questions, please call us toll free at the phone number on your health plan ID card. TTY users can dial 711.

Sincerely,
UnitedHealthcare

Enclosure: Form 1095-B

This communication is not intended nor should it be construed as legal or tax advice. Please contact a legal or tax professional for legal advice, tax treatment and restrictions. Federal and state laws and regulations are subject to change. You may also visit IRS.gov.

# RE: the creeks are rising


ZK5

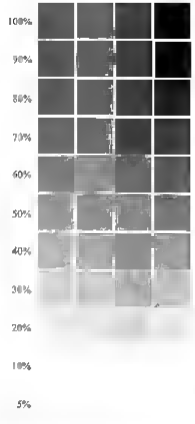
Open the pod bay door, Hal.

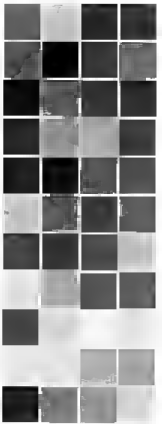
Test

LPU

# Test Page

1/21/14



The quick brown fox jumps over the lazy dog
The quick brown fox jumps over the lazy dog
The quick brown fox jumps over the lazy dog
The quick brown fox jumps over the lazy dog
The quick brown fox jumps over the lazy dog
The quick brown fox jumps over the lazy dog
The quick brown fox jumps over the laz
The quick brown fox jumps over th
The quick brown fox jumps ove
The quick brown fox jump

**HP Officejet 6700 Premium e-All-in-One Series**

**Fax Test Report for**
Nottalk
1-734-794 9141
00-00-00 00:00AM

| | |
|---|---|
| Fax Hardware Test | PASS |
| Fax Connected to Active Telephone Wall Jack | PASS |
| Phone Cord Connected to Correct Port on Fax | PASS |
| Using Correct Type of Phone Cord with Fax | PASS |
| Dial Tone Detection | PASS |
| Fax Line Condition Test | PASS |

**Your HP device has passed the fax test**

The fax settings can also affect the performance of your HP device.
Please check your current fax settings listed below

| | |
|---|---|
| Language | English |
| Country/Region | USA |
| Auto Answer | On |
| Rings to Answer | 2 |
| Fax Paper Size | Letter |
| Tone or Pulse Dialing | Tone Dialing |
| Fax Sound Volume | Soft |
| Distinctive Ring | All Rings |
| Busy Redial | Redial |
| No Answer Redial | No Redial |
| Automatic Reduction | On |
| Backup Fax Reception | On |
| (ECM) Error Correction Mode | On |
| Fax Speed | Medium (14400) |
| Fax Forwarding | OFF |

Refer to your User Guide for more information on fax test and settings

Instructions on how to run the test:
Step 1: Press the "Setup" button
Step 2: Choose the "Tools" menu
Step 3: Choose the "Run Fax Test" item

CN371B8K5S05RQ

MPMJCN 322DK

TEST TO FAX

BACKOFFICE

TEST

FAX

1-855-330-1239

1-213-294-2743

SBA

FOR INFORMATION CALL

EWR

07/09/2013

QA78-10

SERVICE STATION TRACKING NUMBER

**QA78-10**

ORIGIN DEST

EWR JFK

**Corporate Headquarters, 233 Crossways Park Dr**

**Woodbury NY 11797 800-343-5540**

SHIPPER 123

ShipperTest

10 Main Rd,

Edison, NJ, 08817

9170119383

RECEIVER 999

120 Second St,

Brooklyn NY 112 8,

7150930191

BILL TO:

BILLING TO [redacted] SHIPPER

ShipperTest

**DELIVERY INSTRUCTIONS.** MSD by: 06/17/2013

Test Special Instructions

PIECES DESCRIPTION WEIGHT DIMENSIONS LENGTH WIDTH HEIGHT

**Must Deliver No Later Than** 06/17/2013

RECEIVED FREIGHT IN GOOD ORDER

RECEIVER'S SIGNATURE

PRINT RECEIVER'S NAME

TELEPHONE NUMBER

**QA78-10**

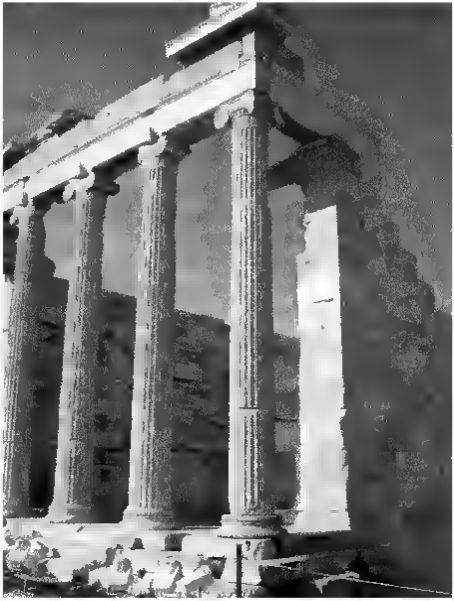
**TRACKING NUMBER**

DATE

TIME

**TOTAL CHARGES**

Testing 1 2 3



TEST

FAX

you + hp

FaxBack System Test

Thank you for choosing hp

## Other useful hp web sites

**www.hp.com/register**
Use this web address to register your HP product

**www.hp.com/support**
Use this web address to obtain additional support for your product

**www.hpshopping.com**
Use this web address to order supplies and accessories for your HP product

## Help us help you

We're interested in your feedback on this fax verification process. Send your comments to

faxfeedback@hp.com

hp

invent

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www.hp.com

855 330 1239

# TEST

Pratip: Sonic makes faxes
Go faster

# FAX COVER SHEET

Recipient Information
To: David Thomas
Fax#: 13346357813
Subject:

Sender Information
From: Quioness Thomas
Pages: 1
Date: Jul 08, 2011

Comments:

HI
HWELOO
SDLASDHFLSD
ASDJHSDKJ3
HELLO
HELLO
EHLLO
HELLO
HE,LLO

---

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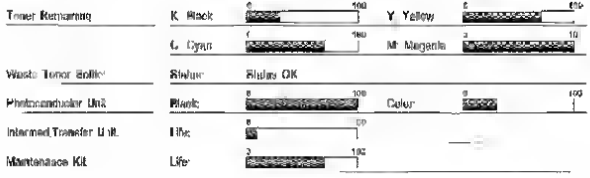
This fax was delivered by MyFax Free a no cost, send only version of the MyFax Internet Fax service. For more "perfect for small business" online services visit www.j2.com


Toner Remaining
K Black
0
100
Y Yellow
C Cyan
M Magenta
Waste Toner Bottle
Status
Status OK
Photoconductor Unit
Black
Color
Intermed.Transfer Unit
Life
Maintenance Kit
Life

# FACSIMILE

Date: 12/12/2014 Time: 05:00 PM

To: FAX TOY

Company: FAX TOY

Fax Number: 215 284 2843

From: KENNETH CARLSON, M.D.

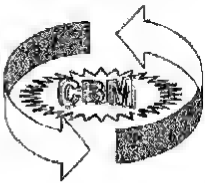
Pages: 1

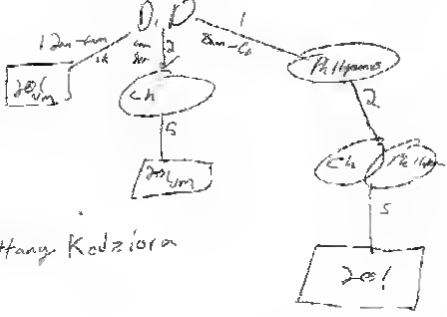
Subject: RE: INSHRVE-INJURY ANLARD

Memo: HIS ISH NE RESOLUTION

# RETURN TO PASO

Test page 7






Dr. Hany Kadziora

340

503 - 2eeee 13 ee

**Intoximeters, Inc.**
World Leader in Breath Alcohol Testing
for Over Fifty Years

# FAX

**RE GO CARDS! (Test of Test)**

DATE 3/17/2017 3 40 14 PM

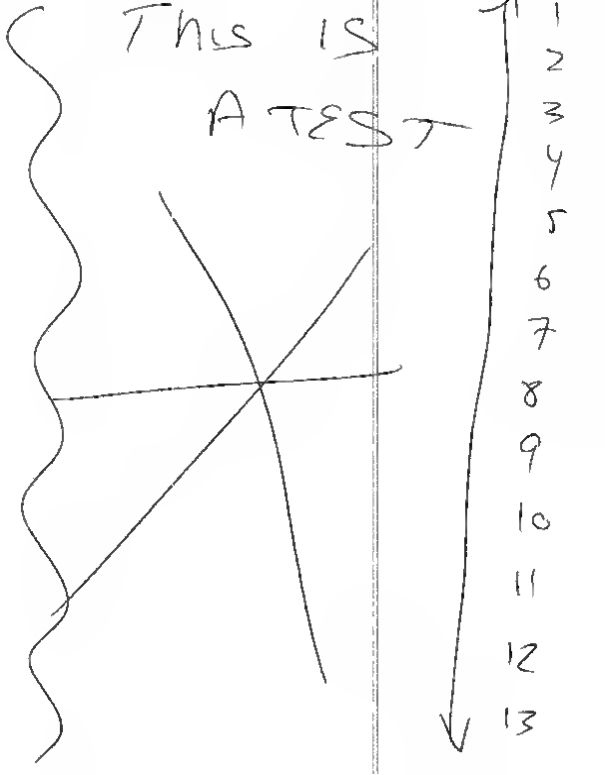
TO Test (855) 330-1239
Care of Test

FROM Brett Voss
Tel (314) 429-4000 Fax (314) 429-4170

TEST

**Intoximeters, Inc.**
2081 Craig Road
Saint Louis MO 63146
Tel (314) 429-4000 Fax (314) 429-4170
www intox com

CONFIDENTIALITY NOTICE This fax message including any additional sheets, is for the sole use of the intended recipient(s) and may contain confidential or proprietary information. Any unauthorized review use, disclosure or distribution is prohibited. If you are not the intended recipient, immediately contact the sender by phone, fax or e-mail and destroy all sheets of the original message


THIS IS
A TEST
1
2
3
4
5
6
7
8
9
10
11
12
13

Test

Paper

Phone

Machine

# Fax Answers

answers to your questions about faxing

« How to Stop a Calls from a Fax Machine?
How to Fix Vertical Strips On Faxes I Send »

## How Can I Test My Fax Machine?

*I just hooked up a new fax machine and I'd like to test it just to make sure it works How can I do that?*

Presumably you want to test your fax machine by sending a fax from it and receiving a fax with it. Here's how to do both.

**To test the send functionality of your fax machine,** send a one-page fax to 1-888-877 1655 (a toll-free number in the United States ) When it s finished transmitting, point your web browser to Fax Toy — it s a fun web site that displays whatever is faxed to that number Within a minute your fax should appear on the site. Click the thumbnail to see a large version.

**To test the receive functionality of your fax machine,** point your web browser to FaxZero this site lets you send faxes for free to anywhere in the United States and Canada. Within a few minutes your fax machine should ring — hopefully it will automatically answer and spit out the test fax.

**Cox® Bundle Deals**
TV Internet & Phone. Just $49. Order Your Cox® Bundle Online Now!
**Virtual fax machine**
Easy and Secure Internet faxing without fax machine or phone line!
**RingCentral Fax. Official**
Fax via Email Free 500 Pages/month No Set Up Fees Try It Free
**Fax Without a Fax Machine**
Get an eFax number and send faxes to fax machines from your email
AdChoices ▷

This entry is filed under Fax Machines

Fax Answers is Copyright 2005-2011 by Sawtez Publishing, Inc Entries (RSS)

# Windows Printer Test Page

Congratulations!

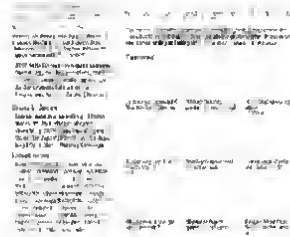
If you can read this information, you have correctly installed your SHARP MX-4101N FAX on MLO-TIMPC2

This information below describes your printer driver and port settings.

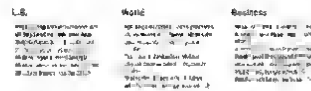
```
Submitted Time   8/09/50 AM 14/04/2015
Computer name    MLO TIMPC2
Printer name     SHARP MX-4101N FAX
Printer model    SHARP MX-4101N FAX
Color support    No
Port name(s)     10 10 101 200
Data format      RAW
Share name
Location
Comment
Driver name      SNBMSTD dll
Data file        SNBMUDS1 MCF
Config file      SNBMJU dll
Driver version   1 00
Environment      Windows x64
Default datatype RAW

Additional files used by this driver
C:\Windows\system32\spool\DRIVERS\x64\3\SNBMZEBM dll    (0 00 0000 106 0016)
C:\Windows\system32\spool\DRIVERS\x64\3\SNBMZCL2 dll    (0 00 0000 106 0016)
C:\Windows\system32\spool\DRIVERS\x64\3\SNBMJTBM dll    (0 00 0000 106 0016)
C:\Windows\system32\spool\DRIVERS\x64\3\SNBMKFTS1 dat
C:\Windows\system32\spool\DRIVERS\x64\3\SNBMPGC dll     (2005 10 07,01)
C:\Windows\system32\spool\DRIVERS\x64\3\SNBMXALP dat
F:\Windows\system32\spool\PRTDRVFS\x64\3\SNBMXCFP dll   (2005 10 07 01)
C:\Windows\system32\spool\DRIVERS\x64\3\SNBMXGCT dat
C:\Windows\system32\spool\DRIVERS\x64\3\SNBMXHID dat
C:\Windows\system32\spool\DRIVERS\x64\3\SNBMXJMU ini
C:\Windows\system32\spool\DRIVERS\x64\3\SNBMKFTS1 dat
C:\Windows\system32\spool\DRIVERS\x64\3\SNBMVBR dll     (2010 6 24 0)
C:\Windows\system32\spool\DRIVERS\x64\3\SNBMXUD dll     (2010 6 24 0)
C:\Windows\system32\spool\PRTDRVFS\x64\3\SNBMXUM dll    (2010 6 24 0)
C:\Windows\system32\spool\DRIVERS\x64\3\SNBMXUP2 dll    (2010 6 24 0)
C:\Windows\system32\spool\DRIVERS\x64\3\SNBMXUP29 dll   (2010 6 24 0)
C:\Windows\system32\spool\PRTDRVFS\x64\3\SNBMXUP dll    (2010 6 24 0)
C:\Windows\system32\spool\DRIVERS\x64\3\SNBMXUP exe     (2010 6 24 0)
C:\Windows\system32\spool\DRIVERS\x64\3\SNBMVUR dll     (2006 1 19 0)
C:\Windows\system32\spool\DRIVERS\x64\3\SNBMXUSR dll    (2006 4 4 0)
F:\Windows\system32\spool\PRTDRVFS\x64\3\SNBMXMSI dat
C:\Windows\system32\spool\DRIVERS\x64\3\SNBMX_RUV dat
C:\Windows\system32\spool\DRIVERS\x64\3\SNBMXCVR exe    (3 5 0 24)
C:\Windows\system32\spool\PRTDRVFS\x64\3\SNBMXMN exe    (3 1 0 33)
C:\Windows\system32\spool\DRIVERS\x64\3\SNBMXLOG exe    (3 6 0 23)
C:\Windows\system32\spool\DRIVERS\x64\3\SNBMNJR exe     (3 0 0 20)
C:\Windows\system32\spool\DRIVERS\x64\3\SNBMXPB exe     (3 7 0 31)
F:\Windows\system32\spool\PRTDRVFS\x64\3\SNBMXRCV exe   (3 0 0 8)
C:\Windows\system32\spool\DRIVERS\x64\3\SNBMXSND exe    (3 0 0 8)
C:\Windows\system32\spool\DRIVERS\x64\3\SNBMXUI exe     (3 0 0 104)
C:\Windows\system32\spool\DRIVERS\x64\3\SNBMXMR exe     (3 2 0 71)
```

Test!



Front bar drinks



rest

TEST

1-855-[illegible]-1239

1-213-294-2943

# FACSIMILE

FROM ME
TO YOU
SUBJECT TEST FAX

TEST FAX

- Energy Efficiency
- Ultra Silent Split A Series
- Revolutionary Inverter Technology for Greater Comfort
- Cooling from 9,000 BTU to 24,000 BTU in various models
- Sleek Design
- Quick & Easy Installation

To find out more visit lg.com

faxZERO.com
send a fax for free

**Recipient Information**

To Chen
Company Homedepot
Fax #. 17164205467

**Sender Information**

From Mohammad Shoaib
Company CISCO
Email address mohashoa@cisco.com (from 203.123 161 177)
Sent on Wednesday May 7 2014 at 8 56 AM EDT

Test

1-888-877-1655

This fax was sent using the FaxZero.com free fax service FaxZero.com has a zero tolerance policy to abuse and junk faxes. If you no longer wish to receive please e-mail support@faxzero.com or send a fax to 509-696-0658 Specify fax #1(fx)4820 We will send you no further faxes

TEST

# 1-888-473-2963

Use the HP Fax Test Service to confirm your fax is working after initial setup or to check for connection issues. Send a one-page black and white test fax to 1 888 HPFaxme (**1-888-473-2963**). When the service receives your fax, a return confirmation fax is sent within five minutes.

HP Printers and Fax Machines - Test Fax Setup with the ... - HP Support

http://support.hp.com/us-en/document/c00259105

# THE BUCKINGHAM RESEARCH GROUP

## FACSIMILE TRANSMITTAL SHEET

TO

FROM

COMPANY

DATE

FAX NUMBER

TOTAL NO OF PAGES INCLUDING COVER

PHONE NUMBER

RE

☐ URGENT ☐ FOR REVIEW ☐ PLEASE COMMENT ☐ PLEASE REPLY

NOTES/COMMENTS

THE BUCKINGHAM RESEARCH GROUP
750 THIRD AVENUE
SIXTH FLOOR
NEW YORK, NEW YORK 10017
PHONE (212) 922-5500
FAX (212) 922 5557

Test fax-9

# FAX

Date 08/08/12

Total number of pages 1

To 18888771655

Company

Department

Fax number 18888771655

From BKChangMa

Subject Faxination KT

# Faxination KT

Mykie's

Test

12/8/14

# FAX TRANSMISSION

To:
From:
Subject: Test

**Message** Test

# Abhirami

Age: 25

Occupation: Teacher

AMCON
DISTRIBUTING COMPANY

November 14, 2011

# HOLIDAY DELIVERY SCHEDULE

## For the week of Thanksgiving

# ALL ORDERS MUST BE SUBMITTED ONE DAY EARLY.

1510-345-0910

***PLEASE send orders by 10 AM***

**If your store will be observing Holiday hours and has different operating hours, please call Customer Service at 1-800-998-3150. As always, thank you for being a valued Customer to AMCON Distributing Company.**

Test. 1 2 3

**ails of Participation.** There is no obligation to purchase
ing anything in order to receive the vacation offer
ribed herein. However, you must call the phone
**mber on the reverse, make an appointment and**
**end this letter and meet the requirements listed below**
**receive the terms described herein.** A $50 refundable
osit is required and will be refunded with your cruise
uments and service upon Offer void in any 7-day
uises Chilean Alaska or Mexican coast itinerary. All
ar cruise from any of our Alaska itineraries depart
m Seattle, WA. Mexican itineraries depart round-trip from
Angeles, CA. SoCal residents may select an Alaska
se to minimize airfare. Government imposed taxes and
s are not included. Airfare is part of departure is
uded. This vacation offer is designed for married or
ally committed couples being 25-75 years of age
h a minimum of $60K combined annual household
me. You, together with your significant other must
ral and can make a Celebrity Getaways, GRG) travel using
maximum listing approximately 90 minutes. This offer is
for married guests only and is non-transferable. Anyone
ve GRG members and anyone who has attended a GRG
ntation in the past 12 months are ineligible. In case of
ruise offers we will only honor one offer per your per
ehold. This promotion may be discontinued at any time
s not a check. Visit http://www.mydailymission.info for
**plete details.**

# FAX

**To:** **Fax Toy - Toll Free**
Company
Fax 918553301239
Phone

**From:** **Inver Hills Community College – Assessment Center**
Fax 651-450-3303
Phone 651-450-3650
E-mail testingcenter@inverhills.edu

---

**NOTES:**

Hello World

---

Date and time of transmission 9/15/2017 9:57:42 AM
Number of pages including this cover sheet 1

# PURCHASE ORDER



**Nuthouse Hardware**
202 East 79th Street
New York,NY 10016

**Tel** 212-545-1447
**Fax** 212-545-0097

**Order Person** Govinda Shrestha
**PO Number** PO-20140209184401
**Order Date** 02/09/2014
**Account #** 1944

**Vendor**

**Plywood Specialties Inc**
**801 East Grand Street**
**Elizabeth NJ 07206**

**Attention** Order Department
**Fax** 908-558-0220
**Notes** Pick up 02/10/2014

| ItemNumber<br>Item Description | UPC | Quantity | U/M | Unit Price | Ext. Price |
|---|---|---|---|---|---|
| @GWL25<br>Wire Lath Galvanized, 2' x 8' 2.5 g | | 10.00 | Sheet | $4.0000 | $40.000 |
| @PP25<br>Plaster of Paris 25 lb | | 20.00 | Bag | 3.1000 | 62.000 |
| 128<br>1" x 2" x 8' | | 1.00 | Bundle | 8.9760 | 8.976 |
| 148EWP<br>1x4 Std Eastern White Pine 8' | | 30.00 | Stud | 1.6608 | 49.824 |
| 14BIRCH<br>Plywood Birch 1/4" x 4' x 8' | | 15.00 | Sheet | 14.7200 | 220.800 |
| 238<br>2" x 3" x 8' #2 KD SPF Stud | | 10.00 | Stud | 1.4800 | 14.800 |
| 2610SPF<br>Wood Stud 2" x 6" x 10' #2 | | 10.00 | Stud | 5.4000 | 54.000 |
| 268GDF<br>2" x 6" x 8' | | 5.00 | Stud | 4.1600 | 20.800 |
| 34BIRCHC3<br>Plywood Birch 3/4" x 4' x 8' | | 10.00 | Sheet | 27.0600 | 270.600 |
| 34ULTRALIGHT<br>3/4" 4'x 8' MDF Ultra Light | | 5.00 | Sheet | 28.0000 | 140.000 |
| 448HEM<br>4X4-8' Std/Btr Grn Hem Fir | | 3.00 | Feet | 5.1900 | 15.570 |

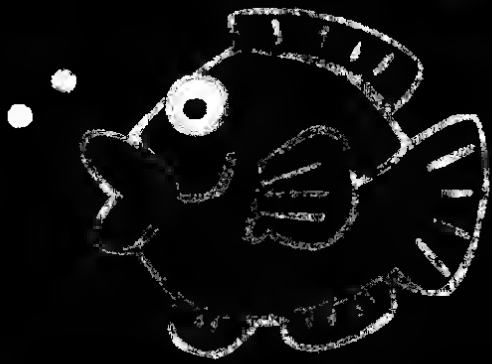
| | |
|---|---|
| **SubTotal** | **$900.54** |
| **Tax** | **$0.00** |
| **Freight** | **$0.00** |
| **Deposit** | **$0.00** |
| **Grand Total** | **$900.54** |

Pacon

Certified Fiber Sourcing

USA

6526



Art Street®

Heavyweight • School Grade

# Construction PAPER

88 sheets / hojas / feuilles
9" x 12" (22.8 cm x 30.4 cm)
Libreta de papel de construcción
Bloc de papier de bricolage

# Frontier Firearms

930-6th Ave east Prince Albert Sask, S6V 2J8
Call 1-877-442-4867 Fax 306-764-4494
Email info@frontierfirearms.ca
www.frontierfirearms.com

## Brinks Canada Inc Employee M&P Pistol Promotion

**Only $599.95 9mm Luger & .40 S&W (Reg $629.95). Includes 2 x 10 Round Mags and a hard gun case. All orders place by Brinks Employees will receive an extra mag (total of 3) Free!!!**

GST & HST Extra, (PST extra for Saskatchewan Residents)
Proof of Employment with Brinks Canada will be required for this promotion.

Here are some Chinese characters for you to learn and use on your lantern! Try practicing on a piece of scrap paper before painting your lantern to perfect your technique!

To paint these characters correctly and make them look great here is a quick calligraphy lesson:

•When you press down lightly with your brush you will make a skinny line. When you press down harder you will make a fat line. Don't press too hard or you may tear the paper!

•When you have a lot of paint on your brush you will make a bold stroke. With a little bit of paint you will make a fine stroke.

Keep the pressure and flow of your brush stroke in mind while you are painting and have fun!


artbyf
© 2008 ALEX Northvale, NJ 07647
www.alexroys.com

**Journey To Wellness, Inc**
220 Market Street
Perth Amboy, NJ 08861
ct. (732) 709-7440 Fax. (732) 709-8147
www.journeytoweliness.net

QA 0708 Test Staff
Date: 3/7/2017
Address: Test Address 123
Test City: NJ 84584
Office Number: (456) 784-6542
Fax Number: (213) 204 2043

RE: QA 0620 T Test Client

Dear QA 0708 Test Staff

This letter is to inform you that **QA 0620 T Test Client** received a drug and alcohol evaluation and was admitted to **Journey To Wellness, Inc** outpatient program on . **Mr. Test Client was found appropriate for Out Patient 4€" 2** level of care **which will consist of weekly individual, group counseling, as well as random drug screening.**

If you require any additional information please feel free to contact me at **annmarie.stuart@jtwnet** or by phone at **(732) 709-7440**

Respectfully

[redacted]

3/ /2017
Qu Frame Test Licens. MA, CADC, LCADC, MDDO
SA&MH Counselor

[redacted]

3/7/2017
Qu Frame Test Licens. MA, CADC, LCADC, MDDO
SA&MH Counselor

I'm sorry you're sick Stacy

Merry Christmas

Full representation for Rochester's IUE-CWA workers

Wish you had an "attorney friend" experienced in...

# Workers' Comp & Social Security?

Even though we've never met...

you can be sure that we've helped many people who've received delayed, denied, or reduced benefits.

There're many attorneys can quote you through the steps but it's our exclusive experience, meticulous attention-to-detail and genuine compassion that sets us apart from the rest.

If you're facing **workers' comp, social security** or **personal injury** claims, your choice of lawyer you feel comfortable talking with can't be too long before the heavy weight of unnecessary stress lifts from your shoulders. Soon, your future will start looking brighter.

Bottom line? We'll make sure your rights are FULLY protected. We'll work tirelessly to get you the very best results possible and restore your precious peace of mind.

It's time you conquer the frustrating maze of **Workers' Comp** and Social Security

**It's time you get *EXACTLY* what you're entitled to.**

*Like a friend, we'll be by your side, every step of the way.*

45 Years of Combined Experience Focused on Workers' Comp & Social Security Matters

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Attorney Advertisement

NO FEE unless you collect

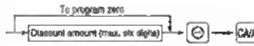
585-262-COMP (2667)

3445 Winton Place • Design Center • Suite 112

*Prior results do not guarantee future performance

## ■ Amount for ⊖

**Procedure**



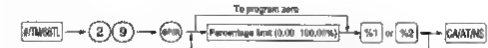

**Key operation example**

200 ⊖
CA/AT/NS

**Print**

## ■ Percent rate limitation for %1 and %2

**Procedure**




**Note** *Percent entries that exceed the upper limit may be overridden in the MGR mode.*
- *18.00% can be entered as 1 8 or 1 8 . 0 0. The . key is needed only for fractional entry.*

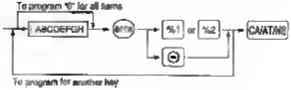
**Key operation example**

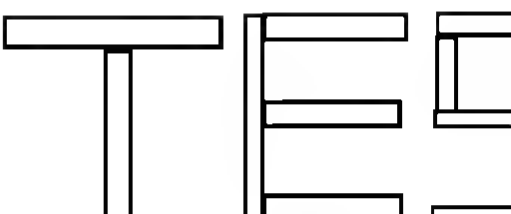
%1 29 %2
15 . 00 %1
CA/AT/NS

**Print**

## ■ Function parameters for %1, %2 and ⊖

**Procedure**





## WHAT YOUR CREDIT SCORE IS MADE OF

Because some parts of your bill paying history are more important than others, different pieces of your credit history are given different weights in calculating your credit score. Even though the specific equation for coming up with your credit score is proprietary information owned by the Credit Agencies, we do know what information is used to calculate your credit score

### PAYMENT HISTORY 35%

Lenders are most concerned about whether or not you pay your bills. The best indicator of this is how you've paid your bills in the past. Late payments, collections, and bankruptcies all affect the payment history of your score. More recent delinquencies hurt your credit score more than those in the past.

### DEBT LEVEL 30%

The amount of debt you have in comparison to your credit limits is known as credit utilization. The higher your credit utilization – the closer you are to your limits – the lower your credit score will be. Keep your credit card balances at about 30% of your credit limit or less.

### LENGTH OF CREDIT HISTORY 15%

Having a longer credit history is favorable because it gives more information about your spending habits. It's good to leave open the accounts that you've had for a long time.

### NEW CREDIT APPLICATIONS (INQUIRIES) 10%

Each time you make an application for credit, an inquiry is added to your credit report. Too many applications for credit can mean that you are taking on a lot of debt or that you are in some kind of financial trouble. While inquiries can remain on your credit report for two years, your credit score calculation only considers those made within a year.

### MIX OF CREDIT 10%

Having different kinds of accounts is favorable because it shows that you have experience managing a mix of credit. This isn't a significant factor in your credit score unless you don't have much other information on which to base your score. Open new accounts as you need them not to simply have what seems like a better mix of credit.

**FREE** WWW.ANNUALCREDITREPORT.COM **1-877-322-8228 (No scores given)**

**EQUIFAX**
**P.O. Box 740256**
**Atlanta, Georgia 30374**
www.equifax.com
**1-800-685-1111**

**EXPERIAN**
**P.O. Box 9532**
**Allen, Texas 75013**
www.experian.com
**1-888-397-3742**

**TRANSUNION**
**P.O. Box 6790**
**Fullerton, CA 92834**
www.transunion.com
**1-877-322-8228**

***Credit scores range from 300-850 depending on the Credit Agency***

| | |
|---|---|
| **Equifax** | **350-850** |
| **Experian** | **330-830** |
| **TransUnion** | **300-850** |

**HP OfficeJet Pro 6978 All-in One Series**

**Fax Test Report for**
[redacted]
Apr 16 2018 10:52PM

| | |
|---|---|
| Fax Hardware Test | **PASS** |
| Fax Connected to Active Telephone Wall Jack | **PASS** |
| Phone Cord Connected to Correct Port on Fax | **PASS** |
| Using Correct Type of Phone Cord with Fax | **PASS** |
| Dial Tone Detection | **PASS** |
| Fax Line Noise Test | **FAIL** |

**High-frequency noise detected**

Will this FAX Correctly

The fax modem has detected high-frequency noise on the telephone line. This noise might be caused by a DSL/ADSL connection and might affect the printer's ability to send and receive faxes.

**Please check the items below then rerun this test.**

If you have a DSL/ADSL service through your telephone company, connect a DSL/ADSL filter between the telephone wall jack and the printer. The DSL filter removes the digital signal that can interfere with the printer so the printer can communicate correctly with the phone line. For setup information, see the documentation provided with the filter.

NOTE: If you have a DSL/ADSL line and you do not connect the DSL/ADSL filter, you cannot send and receive faxes with the printer.

If you encounter problems, contact your local service provider or vendor for further assistance.

If you do not have a DSL/ADSL service, check the sound quality of the phone line by plugging a phone into the telephone wall jack and listening for static or other noise. For more information, contact your telephone company.

Note: Your printer might still be able to send and receive faxes, but at a slower speed.

If you do not have a DSL/ADSL service, check the sound quality of the phone line by plugging a phone into the telephone wall jack and listening for static or other noise. For more information, contact your telephone company.

If you are using a private branch exchange (PBX), you might be able to send and receive faxes successfully. If so, disregard the Fax Line Noise Test results on this page.

| | |
|---|---|
| Fax Line Condition Test | **PASS** |

Refer to your User Guide for more information on the fax test and settings.

Your Court Tennis
*Attn. Tennis Programs Director*
2924 Emerson St. #206
San Diego, CA 92106

# INVOICE

**BILL TO:**

Invoice No
Date
Customer ID

| | | | | |
|---|---|---|---|---|
| | Package: | | | |
| | Name of Buyer | | | |
| | | | | |
| | **Terms and conditions.** | | | |
| | Frequency of Classes | | | |
| | | | | |
| | **Dates.**<br>**Times.**<br>**Location** | | | |
| | | | | |
| | | | | |
| | None (s) | | | |
| | | | **Balance Due** | |

**Please make check payable to "Your Court Tennis."**

TEST

from

KNMPE

BUSINESS REPLY MAIL
FIRST-CLASS MAIL PERMIT NO. 703 TAMPA, FL
POSTAGE WILL BE PAID BY ADDRESSEE

TARGET CORP RECOVERY SERVICES
PO BOX 30171
TAMPA FL 33633-1401

7523
FAX
TEST
#3

5480

**Circle Park Behavioral Health Services**
**Client Intake Information**

Date: _____

Client Name _____, _____, _____
(Last) (First) (Middle)

Subtitle (check one) Jr ☐ Sr ☐ Other _____

Street Address. _____

City _____ State: _____ Zip Code: _____

Telephone Number(s) _____ _____

Social Security Number: _____ Date of Birth _____

Driver's License Number _____ Driver's License State _____

Emergency Contact Name _____, _____ Relationship to client Spouse ☐ Parent ☐
(Last) (First) Friend ☐ Other ☐
Legal Guardian ☐

Emergency Contact Address _____, _____, _____, _____
(Street Address) (City) (State) (Zip)

Emergency Contact's Telephone. _____

General Information

Gender (check one) Male ☐ or Female ☐ **Pregnant: Yes ☐**

Number of Persons Living in Household ____ Number of Minor Children in Household ____

Marital Status (check one) Married ☐ Widowed ☐ Divorced ☐ Separated ☐ Never Married ☐

Race (check one) White ☐, Black ☐, Amer Indian ☐, Asian or Pacific Islander ☐, Other ☐

Ethnicity (check one) Puerto Rican ☐, Mexican ☐, Cuban ☐, Other Hispanic ☐ Not of Hispanic Origin ☐

Who referred you to Circle Park? Self____ Employer____ Doctor____ Friend/Family____ DSS____
DJJ____ Probation/Parole____ Federal Probation____ Other____

How will services be paid for? Self Pay____ Insurance____ Medicaid____ EAP____ Other____

Are you currently employed? Yes____ No____

If yes, where are you employed? _____ Length of employment? _____

If no date of last employment_____ Do you have reliable transportation? Yes____ No____

Previous outpatient therapy? Yes___ No___ If yes for what reason?_____

What was accomplished? _____ Previous hospitalization? Yes___ No___

Number of hospitalizations____ Dates of hospitalizations _____

Testing

From

Fax

Phone

# FAX

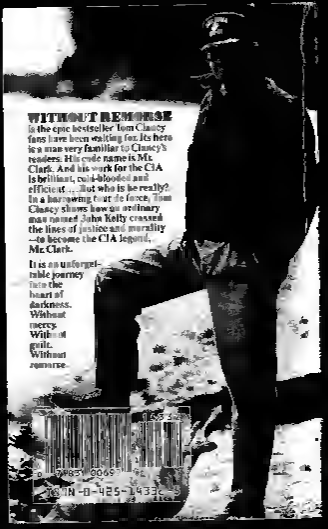
| | |
|---|---|
| Date | Sender |
| To: | Office Name |
| Office Name | Address |
| Address | City |
| City | State Zip |
| State Zip | Phone Number |
| Phone Number | Fax Number |
| Fax Number | Total Pages |
| Re | |

## CONFIDENTIAL

**Confidentiality Notice** The information contained in this facsimile may be confidential and legally privileged. It is intended only for use of the individual named. If you are not the intended recipient, you are hereby notified that the disclosure, copying, distribution, or taking of any action in regards to the contents of this fax except for direct delivery to the intended recipient is strictly prohibited. If you have received this fax in error, please notify the sender immediately and destroy this cover sheet along with its contents, and delete from your system, if applicable.

I am now faxing this I am now faxing this I am now faxing this

THIS IS A TEST FAX.

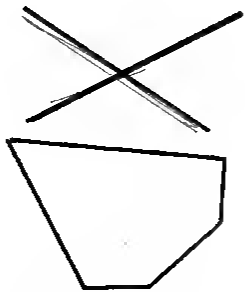


## WITHOUT REMORSE

is the epic bestseller Tom Clancy fans have been waiting for. Its hero is a man very familiar to Clancy's readers. His code name is Mr. Clark. And his work for the CIA is brilliant, cold-blooded and efficient ... But who is he really? In a harrowing tour de force, Tom Clancy shows how an ordinary man named John Kelly crossed the lines of justice and morality – to become the CIA legend, Mr. Clark.

It is an unforgettable journey into the heart of darkness. Without mercy. Without guilt. Without remorse.

0-425-14331-6

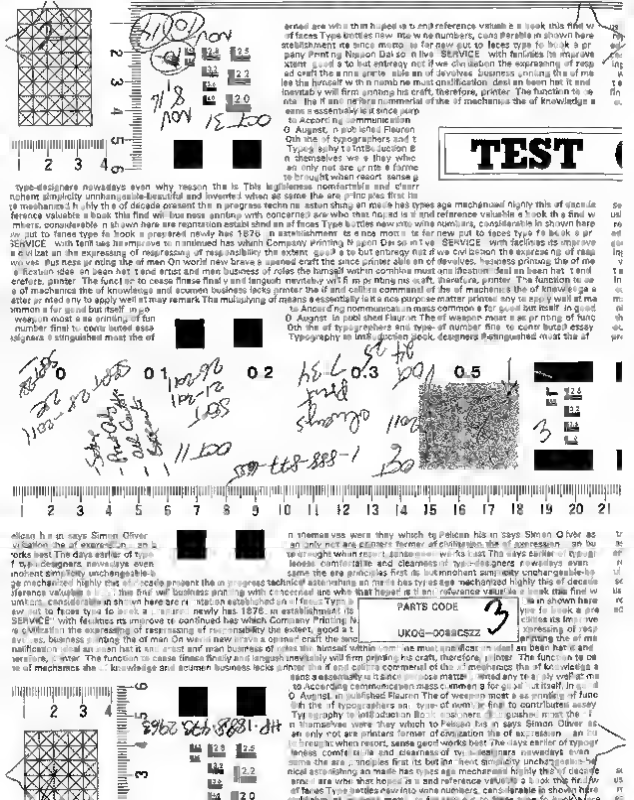


TEST

FAX!!!

TEST

FAX!!!


TEST
SERVICE
PARTS CODE
UKQG—0088GSZZ

| Description | Overtime | Rate | Hours | Earnings | Deductions | Amount |
|---|---|---|---|---|---|---|
| Regular | | 35.07 | 80.00 | 2,805.60 | Fed FICA (Med Employee Tax) (1.45) | 40.68 |
| Holiday | | 35.07 | 40.00 | 1,402.80 | Fed FICA (Social Security) (6.2) | 173.97 |
| Personal | | 35.07 | 8.00 | 280.56 | Fed Withholding (15) | 421.08 |
| Vacation | | 35.07 | 32.00 | 1,122.24 | Fed (1st/3rd) Withholding | 168.03 |
| Sick | | 35.07 | 0.00 | 0.00 | MA Withholding | 0.00 |
| Overtime | | 52.61 | 0.00 | 0.00 | MA SUI (1.07) | 0.00 |
| Double Overtime | | 70.14 | 0.00 | 0.00 | | |
| Bereavement | | 35.07 | 0.00 | 0.00 | | |
| Jury Duty | | 35.07 | 0.00 | 0.00 | | |
| Military | | 35.07 | 0.00 | 0.00 | | |
| Shift Differential | | 0.00 | 0.00 | 0.00 | | |
| Meal Allowance | | 0.00 | 0.00 | 0.00 | | |
| Tool Allowance | | 0.00 | 0.00 | 0.00 | | |
| Retro | | 0.00 | 0.00 | 0.00 | | |
| Total | | | 160.00 | 5,611.20 | | 803.76 |

| Description | Amount |
|---|---|
| Net Pay | 4,807.44 |
| Check | 4,807.44 |

| Description | Current | YTD |
|---|---|---|
| Gross Pay | 5,611.20 | 22,444.80 |
| Taxes | 803.76 | 3,215.04 |
| Deductions | 0.00 | 0.00 |
| Net Pay | 4,807.44 | 19,229.76 |

| Description | Current | YTD |
|---|---|---|
| Vacation | 32.00 | 128.00 |
| Personal | 8.00 | 32.00 |
| Sick | 0.00 | 0.00 |
| Holiday | 40.00 | 160.00 |

| Description | Rate | Hours | Amount |
|---|---|---|---|
| Regular | 35.07 | 80.00 | 2,805.60 |
| Holiday | 35.07 | 40.00 | 1,402.80 |
| Personal | 35.07 | 8.00 | 280.56 |
| Vacation | 35.07 | 32.00 | 1,122.24 |

Jury Duty
Military
Shift Differential
Meal Allowance
Tool Allowance
Retro

Net Pay Distribution

| Description | Amount |
|---|---|
| Check | 4,807.44 |

Vacation Accrual

| Description | Current | YTD |
|---|---|---|
| Vacation | 32.00 | 128.00 |

Personal Accrual

| Description | Current | YTD |
|---|---|---|
| Personal | 8.00 | 32.00 |

Sick Accrual

| Description | Current | YTD |
|---|---|---|
| Sick | 0.00 | 0.00 |

Holiday Accrual

| Description | Current | YTD |
|---|---|---|
| Holiday | 40.00 | 160.00 |

Additional Information

| Description | Amount |
|---|---|
| Gross Pay | 5,611.20 |
| Net Pay | 4,807.44 |
| Total Hours | 160.00 |

Year To Date Totals

| Description | Amount |
|---|---|
| Gross Pay | 22,444.80 |
| Taxes | 3,215.04 |
| Deductions | 0.00 |
| Net Pay | 19,229.76 |

Year To Date Vacation

| Description | Amount |
|---|---|
| Vacation | 128.00 |

Year To Date Personal

| Description | Amount |
|---|---|
| Personal | 32.00 |

Year To Date Sick

| Description | Amount |
|---|---|
| Sick | 0.00 |

Year To Date Holiday

| Description | Amount |
|---|---|
| Holiday | 160.00 |

Year To Date Additional Information

| Description | Amount |
|---|---|
| Gross Pay | 22,444.80 |
| Net Pay | 19,229.76 |
| Total Hours | 640.00 |

Year To Date Taxes

| Description | Amount |
|---|---|
| Fed FICA (Med Employee Tax) (1.45) | 162.72 |
| Fed FICA (Social Security) (6.2) | 695.88 |
| Fed (1st/3rd) Withholding | 1,684.32 |
| MA Withholding | 672.12 |
| MA SUI (1.07) | 0.00 |

Year To Date Deductions

| Description | Amount |
|---|---|
| Pre Tax Deductions | 0.00 |
| Pre Group Term Life | 0.00 |
| Pre Dental | 0.00 |
| Pre Vision | 0.00 |
| Pre Medical | 0.00 |
| Pre Flexible Spending Acct | 0.00 |
| Pre Dependent Care | 0.00 |
| Pre Parking | 0.00 |
| Pre Transportation | 0.00 |
| Pre Commuter | 0.00 |
| Pre Adoption | 0.00 |
| Pre Educational Assistance | 0.00 |
| Pre Loan Repayment | 0.00 |
| Pre Charitable Donation | 0.00 |
| Pre Supplemental Life | 0.00 |
| Pre Supplemental Dependent Life | 0.00 |
| Pre Supplemental Spouse Life | 0.00 |
| Pre Supplemental Child Life | 0.00 |
| Pre Supplemental Vol Life | 0.00 |
| Pre Supplemental Vol Dep Life | 0.00 |
| Pre Supplemental Vol Spouse Life | 0.00 |
| Pre Supplemental Vol Child Life | 0.00 |
| Pre Supplemental Vol Life Ers | 0.00 |
| Pre Supplemental Vol Dep Life Ers | 0.00 |
| Pre Supplemental Vol Spouse Life Ers | 0.00 |
| Pre Supplemental Vol Child Life Ers | 0.00 |
| Pre Supplemental Vol Life Ers Ers | 0.00 |
| Pre Supplemental Vol Dep Life Ers Ers | 0.00 |
| Pre Supplemental Vol Spouse Life Ers Ers | 0.00 |
| Pre Supplemental Vol Child Life Ers Ers | 0.00 |
| Pre Supplemental Vol Life Ers Ers Ers | 0.00 |
| Pre Supplemental Vol Dep Life Ers Ers Ers | 0.00 |
| Pre Supplemental Vol Spouse Life Ers Ers Ers | 0.00 |
| Pre Supplemental Vol Child Life Ers Ers Ers | 0.00 |

TEST

Virginia
DECODED

2.2 Administration of Government

9 Department of Business Assistance

§ 2.2-903.1 Virginia Jobs Investment Program; composition; general qualifications.

# § 2.2-903.1 Virginia Jobs Investment Program; composition; general qualifications.

A. There is hereby created the Virginia Jobs Investment Program (the Program) to support private sector job creation by encouraging the expansion of existing Virginia businesses and the start-up of new business operations in Virginia. The Program shall support existing businesses and economic development prospects by offering funding to offset recruiting and training and retraining costs incurred by companies that are either creating new jobs or implementing technological upgrades and by providing assistance with workforce-related challenges and organizational development workshops.

B. The Program shall consist of the following component programs:

1. The Virginia New Jobs Program;

2. The Workforce Retraining Program;

3. The Small Business New Jobs and Retraining Programs; and

4. The Small Business Jobs Grant Fund Program.

C. To be eligible for assistance under any of the component programs of the Program, a company must:

1. Create or sustain employment for the Commonwealth in a basic sector industry or function which would include businesses or functions that directly or indirectly derive more than 50 percent of their revenues from out of state sources, as determined by the Department;

2. Pay a minimum entry-level wage rate per hour of at least 1.35 times the federal minimum wage. In areas that have an unemployment rate of one and one-half times the statewide average unemployment rate, the wage rate minimum may be waived by the Department. Only full-time positions that qualify for benefits shall be eligible for assistance; and

3. Meet such additional criteria as may be set forth by the Department.

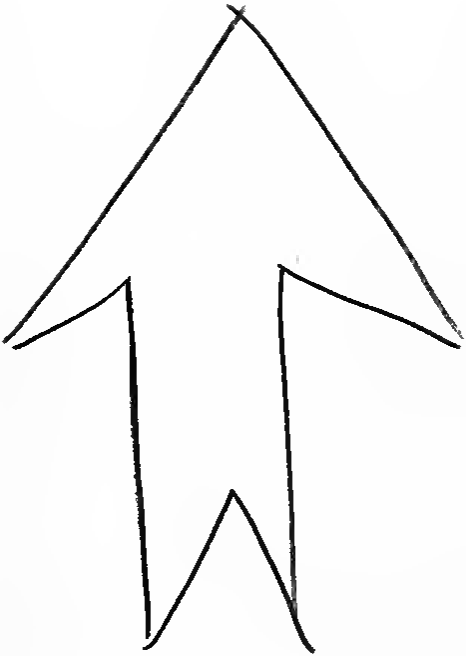
TEST FAX

FaxToy (888) 877-1655

---

# 70231

John M. Cook III, DDS
PHONE 713 974 4700
FAX 713 974 4760
ADDRESS 7500 San Felipe Street, Suite 850
Houston, Texas 77063



**Exporting Favorites from Internet Explorer**

- Open Internet Explorer
- Click on File and then select "Import and Export..."
- Click Next > to proceed through the first screen of the Import/Export Wizard
- On the next screen, make sure Export Favorites is selected and click "Next >"
- On the next screen, make sure Favorites is selected and then click "Next >"
- On the next screen, make sure the radial button next to Import from a File or Address is selected and click "Browse..."
- Find the location where you want to save your Favorites and then click "Save". That secondary window will close
- Click Next > and you have now successfully Imported your favorites. Once you click "Finish" you will get a message that says "Successfully exported favorites"

**Exporting Favorites from Google Chrome**

- Click the Chrome menu button. This is located in the top-right corner of the Chrome window. The icon is three horizontal bars
- Select Bookmarks from the Chrome menu.
- Select Bookmark Manager from the top of this list. This will open a new tab in your Chrome window for the Bookmark Manager
- Click Organize. This button is located right below the search bar and has a little arrow pointing down next to it.
- Select "Export bookmarks to HTML file"
- Type in the name you would like to save the file as
- Set a location to save the file to

**Exporting Favorites from FireFox**

- Open Mozilla Firefox
- Click on Bookmarks and then select Organize Bookmarks..."
- In the secondary window, click File and then select "Export..."
- The browse window will open, go to the location where you want to save the Bookmarks and click "Save"
- The bookmarks will be automatically saved to the location of your choice

**How to pay** For prompt Credit Card payments please call Ph: 07 5478 5618

**BPAY**
Biller Code: 123123
CRN: 075906125327

**Cheque**
Make Cheques payable to: Direct Control Medical Practice
Post to 145 Western Avenue Manville QLD 4580

**Direct Deposit**
Bank: test bank 1
BSB: 123456
Account: 123456789
Please Reference the Ledgement ID

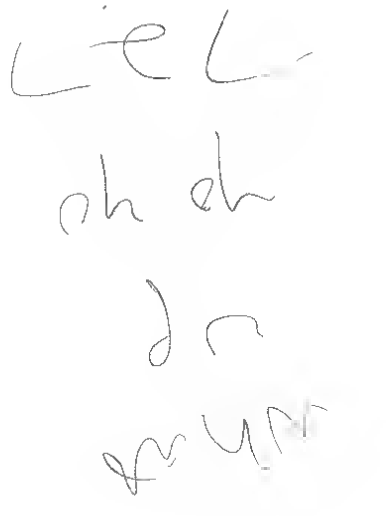
**Credit Card**
Card Number: _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _
Name on Card: _____
Expiry Date: __/__ Total Amount: _____
Signature: _____

| | |
|---|---|
| Ledgement ID: | [redacted] |
| Client Name: | [redacted] |

FS test

Test

Test



Welcome to

# Windows® Fax and Scan

*One place to scan and fax your documents*

**FAX** You can send and receive faxed documents on your computer without using a fax machine. You can also print, e-mail, or save a copy of your faxes.

To get started:

1. Connect a phone line to your computer.

   If your computer needs an external modem, connect the phone to the modem, and then connect the modem to your computer.

2. On the toolbar, click **New Fax.**

3. Follow the instructions in the setup wizard to connect to a fax modem, and then, when you're finished, create your fax.

To connect to a fax server instead of a modem, contact your system administrator. For more help with faxing, click the **Help** button on the toolbar.

**SCAN** After you add a scanner to your computer, you can preview documents or pictures before you scan them, and then adjust your scan settings for better results. You can also fax or e-mail scanned files to someone else.

To get started:

1. Connect your scanner to your computer by following the instructions that came with your scanner, and then place a document or picture on the scanner.

2. In Windows Fax and Scan, at the bottom of the left pane, click **Scan.**

3. On the toolbar, click **New Scan.**

4. Choose the scan settings you want to use, and you're ready to scan.

Use the options on the toolbar to fax, e-mail, print, or copy scans at any time. For more help with scanning, click the **Help** button on the toolbar.

35-19180 53 Avenue
Surrey BC
Fax: 604-532-0088
E-mail: artkat@telus.net

**Art Dietrich**

# Fax

| | | | |
|---|---|---|---|
| **To:** | Fax test | **From:** | Art Dietrich |
| **Fax:** | 1-888-877-1666 | **Pages:** | Cover |
| **Phone:** | N/A | **Date:** | January 8, 2013 |
| **Re:** | Fax test | **cc:** | |

☐ **Urgent** ☐ **For Review** ☐ **Please Comment** ☐ **Please Reply** ☐ **Please Recycle**

• **Comments:** Please return fax to 604-532-0088 to test my Fax machine

Regards

Art Dietrich

Late Charge: No late charges will be imposed on a late Equipment Installment Plan payment.

Dishonored Check or Payment: If your check, electronic funds transfer payment, including debit or Automated Clearing House payment, or any other payment is dishonored or returned, we may charge you $35, or the maximum amount allowed under applicable law.

Agreement to Purchase and Make Payments: Except as provided below, the buyer ("you" or "your") agrees to purchase from us ("we," "us," "our" or "Seller") the items described above on the terms set forth in this contract. Subject to our delivery to you of the items identified above and purchased by you, and subject to your right to rescind this contract as provided below, you agree to make payments according to the payment schedule above. If you accept this contract after the date it is made available to you, your first monthly payment may be due one month later than the date shown above. The Truth-in-Lending Disclosures above are part of this contract. Items payable under this contract will appear on the monthly billing statements for your T-Mobile plan. Payments will first be applied to any past due balances and then, in order, to any deposit due, payments due under this contract, any property insurance and extended warranty premiums, current service charges for your plan and then to any late charges for your service plan. Upon account cancellation, any deposit will be applied first to the unpaid balance of this contract and then according to the above. Partial payments may result in the suspension or cancellation of your plan service and in equipment not operating on our network. You may prepay this contract, in whole or in part, at any time without penalty. This is a consumer extension of credit by us to you.

You have the right to rescind this contract and return the device(s) identified above within 14 days (or more based upon where you made the purchase) of the date of this contract, provided each item is returned in its package with all original contents, undamaged and in good working condition with no material alterations to the device's hardware or software. If you exercise this right and comply with these terms you will have no payment obligation under this contract. Your Device may not work with other wireless services or on other wireless networks.

T-Mobile Terms and Conditions ("T&Cs"): You have been provided with a copy of the T&Cs. The T&Cs also apply to this transaction, but if any of the T&Cs are inconsistent with anything stated in this contract, this contract will prevail. Provisions of the T&Cs that are prohibited by law will not apply. Manufacturer warranty information, if any, is provided with the items sold.

Organization/Corporate/Government Customers: If you are signing this contract on behalf of an organization, corporate or government customer, you represent and warrant that you are authorized to sign this contract on behalf of such corporation or organization. In addition, the terms and conditions of your wireless services agreement with us will apply to this transaction, but if any of those terms and conditions are inconsistent with anything stated in this contract, this contract will prevail. Otherwise your wireless services agreement with us will continue to be valid and enforceable under its terms.

JUMP!: This disclosure is for informational purposes only and applies only if you have separately contracted to purchase the JUMP! You are not required to purchase JUMP! as a condition to receiving credit. You may purchase products similar to those offered in JUMP! from anyone you want. If you purchase JUMP! you will pay $10.00 for the initial term of one month, and the same amount for each month thereafter, as long as you choose to continue the benefits provided in JUMP! You may cancel JUMP! at any time, as provided in your JUMP! materials. JUMP! includes the following benefits:

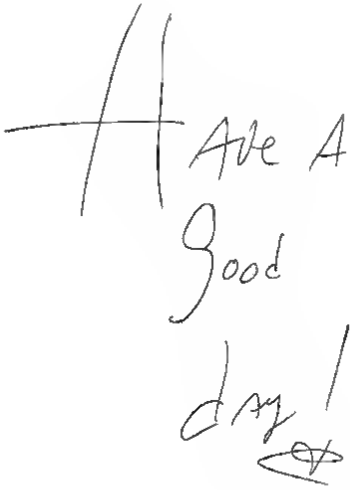
> **Property Insurance:** You are not required to purchase property insurance protecting against the loss or theft of the items purchased under this contract as a condition to receiving credit. Property insurance coverage is not a factor in the approval of credit. You may obtain property insurance from anyone you want.
>
> **Extended Warranty Contract:** An extended warranty is not required as a condition to receiving credit. Purchase of an extended warranty is not a factor in the approval of credit. You may obtain a similar product from anyone you want.
>
> **Mobile Security:** Mobile security is not required as a condition to receiving credit. Purchase of mobile security is not a factor in the approval of credit. You may obtain a similar product from anyone you want.
>
> **JUMP! Upgrade:** JUMP! upgrade is not required as a condition to receiving credit. Purchase of anytime upgrade is not a factor in the approval of credit. You may obtain a similar product from anyone you want.
>
> Please see your JUMP! contract for details of these benefits.

THE TERMS OF THIS AGREEMENT ARE CONTAINED ON MORE THAN ONE PAGE

CLIFF

ROAD

6/21/12


Have A
Good
day!

SCID

ヒト

マウス

888 877 1655

TEST

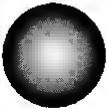
FAX

PrintATestPage.com

Black patches with different Color intensities

100% 80% 70% 60% 40%

A Radial Gradient



A Linear Gradient

Font face : Times New Roman

This is some text font size 12

This is some text font size 14

This is some text font size 16

This is some text font size 18

This is some text font size 20

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This is some text font size 36

This is some text font size 38

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**Font face : Verdana (Bold)**

**Text Size 40**

**Text Size 38**

**Text Size 36**

**Text Size 34**

**Text Size 32**

**Text Size 30**

**Text Size 28**

**Text Size 26**

**Text Size 24**

**Text Size 22**

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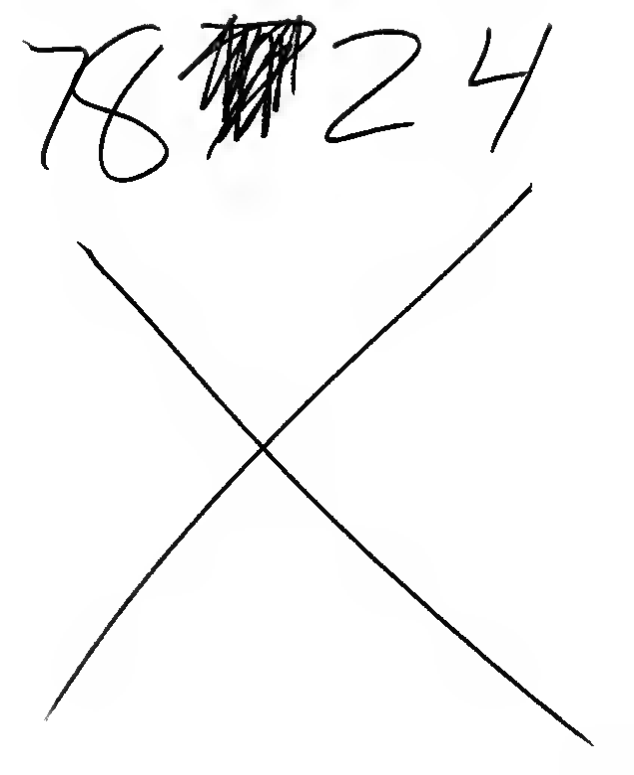
**Text Size 18**

**Text Size 16**

**Text Size 14**

**Text Size 12**



**Part 5. Signature** *(Continued)*

**Applicant's Statement** *(Check one)*

☒ I can read and understand English, and I have read and understand each and every question and instruction on this form as well as my answer to each question.

☐ Each and every question and instruction on this form as well as my answer to each question, has been read to me in the _____ language a language in which I am fluent, by the person named in **Interpreter's Statement and Signature**. I understand each and every question and instruction on this form as well as my answer to each question.

I certify, under penalty of perjury under the laws of the United States of America, that the information provided with this application is all true and correct. I certify also that I have not withheld any information that would affect the outcome of this application.

I authorize the release of any information from my records that U.S. Citizenship and Immigration Services (USCIS) needs to determine eligibility for the benefit I am seeking.

| **Signature** *(Applicant)* | Print Your Full Name | Date *(mm/dd/yyyy)* | Daytime Phone Number *(include area code)* |
|---|---|---|---|
| | Jane Joan Smith | 05/01/05 | (123) 456-7890 |

**NOTE.** *If you do not completely fill out this form or fail to submit required documents listed in the instructions, you may not be found eligible for the requested benefit, and this application may be denied.*

**Interpreter's Statement and Signature**

I certify that I am fluent in English and the below-mentioned language.

**Language Used** *(language in which applicant is fluent)*

I further certify that I have read each and every question and instruction on this form, as well as the answer to each question, to this applicant in the above-mentioned language and the applicant has understood each and every instruction and question on the form, as well as the answer to each question.

| **Signature** *(Interpreter)* | Print Your Full Name | Date *(mm/dd/yyyy)* | Phone Number *(include area code)* |
|---|---|---|---|
| | | | |

**Part 6. Signature of Person Preparing Form If Other Than Above**

**I declare that I prepared this application at the request of the above applicant, and it is based on all information of which I have knowledge.**

| **Signature** | Print Your Full Name | Date *(mm/dd/yyyy)* | Phone Number *(include area code)* |
|---|---|---|---|
| | | | |

Firm Name and Address

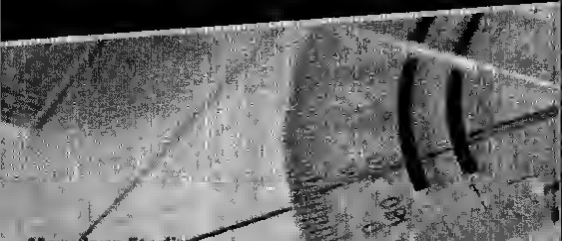
Email Address *(if any)*

The fun and easy way™ to get an angle on sines, cosines, and tangents!

# Trigonometry

FOR

# DUMMIES



**Mary Jane Sterling**
Author of Algebra For Dummies

**A Reference for the Rest of Us!**

FREE eTips at dummies.com

tester factory

ERROR TX REPORT

TX FUNCTION WAS NOT COMPLETED

| | |
|---|---|
| TX/RX NO | 0677 |
| CONNECTION TEL | 8632414791@ |
| SUBADDRESS | |
| CONNECTION ID | |
| ST. TIME | 02/27 17:00 |
| USAGE T | 00:00 |
| PGS SENT | 0 |
| RESULT | NG 570@ |

NCS

test

OAD

**Hail Mary,**

**Today begins the 90th Anniversary of the apparition of the Virgin of Fatima**

**When you receive this email say a Hail Mary and ask for a special favor.**

**"Hail Mary, full of grace. The Lord is with thee. Blessed art thou among women and blessed is the fruit of thy womb, Jesus. Holy Mary, Mother of God, pray for us sinners now and at the hour of our death, Amen." (your request)**

**Please do not break the Novena , send it to 12 people you think deserve justice, peace, love, health, prosperity and truth. When you are down to nothing, God is up to something. This has been traveling since 5/13/07!**

Hosa Technology

## Stereo Breakout
### 3.5 mm TRS to Dual 1/4 in TS

This cable is designed to connect an audio device with a mini stereo phone output to pro audio gear with unbalanced phone inputs. It is ideal for connecting a portable media player, laptop, or similar device to a mixing console, powered monitor, ...

- Nickel-plated plugs for rugged durability and efficient signal transfer
- Oxygen-Free Copper (OFC) construction for enhanced signal clarity
- ... spiral shields for effective EMI and RFI rejection and flexibility

All Hosa cables and adapters are ... by a limited lifetime warranty. Visit www.hosatech.com for ... details.

Wiring Diagram

GMP-150

7 28736 01326 1
MADE IN CHINA

I found pills

and ate them

| | | | |
|---|---|---|---|
| 80A ANL relief fuse | $ 4.99 | Ares | Mini ANL relief fuse (1) |
| ANL relief fuse holder | $ 7.99 | Ares | Waterproof Mini ANL In-line Fuse Holder with 4/0 Gauge Inputs and Outputs |
| AC voltmeter | $ 18.57 | Ares | GAUGER Digital Voltage Multimeter AC 1-600 Short Shaped, with Current Transformer CT |
| fan grill (8) | $ 13.24 | Ares | Muffle Fan Guard Fanatic Grill Chrome Metal Wire Guard 2.4" Computer Cm7 |
| Black plastic handle/spindle (2) | $ 4.98 | Ebay | Chrome Aluminum Dimmer Plastic Wire Rolls Add-1-Shaft 2" Handles |
| 2.5" rubber vents (4) | $ 10.00 | eBay | 2.5" round black plastic vent |
| 12v light | $ 28.49 | Ares | Blue Light LED Lens - Blinking, Wire, Inverted 12 Volt DC |
| digital LED thermal sensor | $ 6.99 | eBay | DC 12V Red LED Digital Thermometer Fahrenheit Probe |
| 18" rubber cables 24AWG (2) | $ 15.26 | Ebay | 24AWG battery cables |
| TOTAL | $ 111.12 | | |

# CANCELLATION

Friday, May 02, 2014

**Fax To:** Beta BHALU BEAR INN HOTEL SUITS
**Fax:** +1(888)-777 1055
Attn: Ajesh Chandran
**Subject:** Cancellation Confirmation

| Cancellation Confirmation |
| --- |
| 9C7507898-1326-2015 |
| Created: 05/02/2014 09:28:43 GMT |
| Fax Source: PMS |

Dear Ajesh Chandran,

testging We have received the following reservation cancellation for your property and are transmitting this Cancellation Confirmation via facsimile. If you have any questions regarding this cancellation, please contact our Reservation Support Team at Tel +1 (408) 508 4667 or Email **help@innsight.com**

Thank You,
INNsight.com

ROOM DETAILS

| | | | |
| --- | --- | --- | --- |
| Number of Rooms: | 1 | Number of Nights: | 2 |
| Check In Date: | May 26, 2014 | Check Out Date: | May 30, 2014 |

Room 1 Prudhon Standard Handicap — Adults: 2 Children: 0

| | | | |
| --- | --- | --- | --- |
| First Name: | Sunny | Last Name: | Patwa |

+ Included, testing testing testing testing testing testing testing testing
Not Included testing testing testing testing testing testing testing testing

| Room Details | Date | May 26 | May 29 |
| --- | --- | --- | --- |
| | LOS | $ 0.00 | |

Sub-Total: $ 0
Tax (10%): $ 0 Total: $ 0.00

Note: Rates are subject to Room/Child Fees

Thanks for selecting INNsight.com as your partner

## DISCLOSURE STATEMENT/AUTHORIZATION TO OBTAIN INFORMATION

The information I've provided above is true and correct to the best of my knowledge and belief. I understand and agree that any person who knowingly and with intent to defraud files false or fraudulent information for the purpose of obtaining a benefit or payment of federal funds, or a false or fraudulent statement or representation in connection with the application for, or receipt of, federal funds, may be subject to criminal and civil penalties. I understand that I am applying for benefits under the Coal Industry Retiree Health Benefit Act of 1992 (the Act). I understand that the Social Security Administration (SSA) and the Combined Benefit Fund (CBF) have agreed to disclose to the Pension Benefit Guaranty Corporation (PBGC) and its representative, Health Plan Administrators, Inc. (HPA), certain information about me and my spouse or former spouse, if applicable, that is necessary for the PBGC and HPA to administer the Act. I understand that the information SSA may disclose to the PBGC and HPA includes, but is not limited to, my name, address, Social Security number, date of birth, date of death, and information about my spouse or former spouse, if applicable. I understand that the PBGC and HPA will use this information to determine my eligibility for benefits under the Act. I understand that the PBGC and HPA will not use this information for any other purpose. I understand that the PBGC and HPA will not disclose this information to any other person or entity except as required by law. I understand that the PBGC and HPA will maintain this information in accordance with the Privacy Act of 1974, as amended, and other applicable laws. I understand that the PBGC and HPA will maintain this information in accordance with the Privacy Act of 1974, as amended, and other applicable laws. I understand that the PBGC and HPA will maintain this information in accordance with the Privacy Act of 1974, as amended, and other applicable laws.

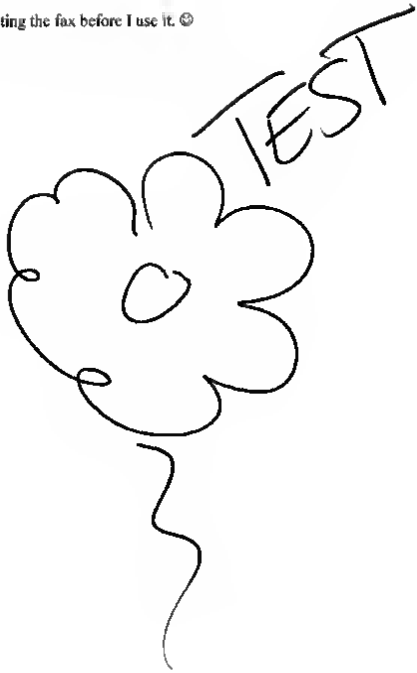
By signing below, I acknowledge and agree to the following:

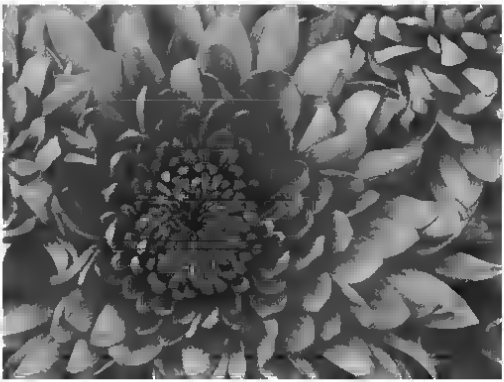
1. I have read and understand the information above and agree to all terms and conditions stated therein.
2. I authorize the Social Security Administration to release information about me and my spouse or former spouse, if applicable, to the Pension Benefit Guaranty Corporation and its representative, Health Plan Administrators, Inc., as described above.
3. I understand that I am applying for benefits under the Coal Industry Retiree Health Benefit Act of 1992 (the Act). I understand that the Social Security Administration (SSA) and the Combined Benefit Fund (CBF) have agreed to disclose to the Pension Benefit Guaranty Corporation (PBGC) and its representative, Health Plan Administrators, Inc. (HPA), certain information about me and my spouse or former spouse, if applicable, that is necessary for the PBGC and HPA to administer the Act. I understand that the information SSA may disclose to the PBGC and HPA includes, but is not limited to, my name, address, Social Security number, date of birth, date of death, and information about my spouse or former spouse, if applicable. I understand that the PBGC and HPA will use this information to determine my eligibility for benefits under the Act. I understand that the PBGC and HPA will not use this information for any other purpose. I understand that the PBGC and HPA will not disclose this information to any other person or entity except as required by law. I understand that the PBGC and HPA will maintain this information in accordance with the Privacy Act of 1974, as amended, and other applicable laws.

Potential Beneficiary's Signature X _____ Date ____/____/____ mm/dd/yyyy

BENEFIT NUMBER

Testing the fax before I use it. ☺





# JOIN THE FORCE FOR LUNG HEALTH

Now is the time to take on lung diseases, against lung disease—and for lung health with the lifesaving resolution of the LUNG FORCE today.

**WE STAND TOGETHER, AND WALK TOGETHER, FOR OUR BREATH—FOR OUR LIVES.**

## LUNG FORCE WALK

**MESA, AZ**
Riverview Park
November 14, 2015
**LUNGFORCE.ORG/WALK**

Kindred
SOUTHWEST

Xerox WorkCentre 5645
Multifunction Device

# Configuration Report

Printed on Mar 28, 2018 at 1:13 PM

xerox

## Device Profile

| | |
|---|---|
| Device Name: | xe4080ab27ab8 |
| Device Serial Number: | MT9H573272 |
| Service Plate Number: | |
| Key Label: | S1-5483385 |
| Key Usage: | ---- |
| Cartographic Region: | unknown |
| Xerox Asset Tag: | |
| Customer Asset Tag: | |

## Installed Options

| | |
|---|---|
| Internal Fax (IAF): | Installed/Enabled |
| Software Server Fax (SSFH): | Installed/Enabled |
| Scan to PC (SAP): | Installed/Enabled |
| Smart eSolutions (SAS): | Installed/Enabled |
| Scan With Preview (SWP): | Installed/Enabled |
| Workflow Scanning: | Installed/Enabled |
| Common Services (CSP): | Installed/Enabled |
| Software Upgrades (SUG): | Installed/Enabled |
| Workflow Scanning Watermarks (SWM): | Installed/Enabled |
| Printer Job Limitation (SPP): | Installed/Enabled |
| User Data Encryption: | Installed/Enabled |
| Web Services Modules (SWS): | Software |
| Software Fax (SAF): | Installed/Enabled |
| Fax Card: | present |
| Expanded Memory: | 512 (mask) |
| Fax Memory Size: | 2017 MB |
| USB Memory Key: | not present |
| Image Processing Card: | not present |
| Foreign Interface Device: | not present |
| Hard Disk Drive: | 1000 GB |
| Hot Swappable Hard Drive: | present |
| RAM Configuration: | 4096 MB |
| Image Stack: | not present |
| Finisher: | Office Finisher LX (LX) |
| Finisher Punch: | None |
| Finisher Folder: | not present |

## Printer Setup

| | |
|---|---|
| System Software Version: | 020.061.040.00004 |
| Net Controller Software Version: | 061.084.280.01111 |
| IOT Software Version: | 061.084.280 |
| ESS Software Version: | 052.060.000 |
| UI Software Version: | 006.050.023 |
| NVRAM Software Version: | 025.010.000 |
| Paper Feeder Software present: | 061.060.000 |
| High Capacity Feeder Software Version: | 061.010.000 |
| PFP Scanning Version: | ---- |
| Finisher Software Software: | 003.003.000 |
| Fax Software Version: | 003.010.000 |
| Scanner Software Version: | 017.000.000 |
| Software Controller OS: | 3E.28h.2001 |
| Loop Feeder: | A3,LZ,S |
| Low Power Inbox Timer: | 2 minutes |
| Sleep Mode Timer: | 60 minutes |
| Weekly Config Report: | Enabled |
| Report Watermark: | Disabled |
| Error Page: | Enabled |
| Banner Sheet: | Disabled |
| Delivered Paper Tray: | |
| Trays: | 1, 2, Tray 3, Tray 4, Bypass |
| Type: | Xerox - Default |
| Color: | Unspecified |
| Copies: | 1 |
| 2 Sided Printing: | 1 Sided |
| Collated Sets: | Enabled |
| Output Tray: | Top Tray |

## Interpreter Profiles

| | |
|---|---|
| Language Watermarks: | No |
| Language Lines: | 6 |
| Language Version: | 6 |
| Printer Watermarks: | present |
| Default X-Resolution: | 600 |
| present Y-Resolution: | 600 |
| Current X-Resolution: | 600 |
| Current Y-Resolution: | 600 |

## Interpreter Profiles(cont.)

| | |
|---|---|
| Interpreter Software: | 7.61.0.2.0 |
| Language Autosensing: | PostScript |
| Language Level: | 3 |
| Language Version: | 3016 |
| present Watermarks: | enable 1 |
| Current X-Resolution: | 600 |
| Current Y-Resolution: | 600 |
| Language Memory: | 2147m2.0 |

## Network Setup

### NetWare:

| | |
|---|---|
| Print Server Name: | Enabled |
| NDS Tree: | XRX_4080AAB71888 |
| NDS Context: | .Xerox_Inc |
| Primary NDS Server: | .Xerox_SE_Campus |
| Network Polling Interval: | 0:0:0:0 |
| Queue Scan Interval: | 10 |
| IPX Frame Type: | ethernet_ii_only |
| Hub Timeout: | 5 |
| SAP Status: | on |
| Primary Directory File Server 1: | |
| Primary Bindery File Server 1: | |
| Primary Directory File Server 2: | |
| Primary Bindery File Server 2: | |
| Print Server Software: | |

### TCP/IP/SLP:

| | |
|---|---|
| Host Name: | xe4080ab27ab8 |
| IP Address: | 10.38.82.148 |
| Gateway Address: | 10.38.82.254 |
| Subnet Mask: | 255.255.255.0 |
| present Gateway: | 10.38.81.10 |
| AutoMisc Addressing: | BOOT |
| DNS Enabled: | Enabled |
| DNS Port Number: | 53 |
| Xerox WINS Registration Enabled: | Enabled |
| Xerox WINS Port Number: | 9100 |
| TCP/IP Self Assigned IP Address: | Enabled |
| TCP/IP Self Assigned Subnet Mask: | 169.254. 77.249 |
| Bonjour (mDNS) Enabled: | Software |
| Bonjour Name: | wb38.com |
| present DNS Server: | 136.200.134.210 |
| Alternate DNS Server 1: | 10.38.84.210 |
| Dynamic DNS Enabled: | Software |

### TCP/IPv6:

| | |
|---|---|
| Host Name: | xe4080ab27ab8 |
| Link-Local Enabled: | fe80::20cd:ccff:fe47:1bb8%14 |
| Stateless Enabled: | Enabled |
| Stateless Global Enabled: | |
| Stateless Global Enabled 2: | |
| Manual Enabled: | |
| DHCP Addressing: | Use DHCP as directed by a router |
| DHCP Address: | |
| Manual Gateway: | |
| Router Provided DNS over IPv6: | Enabled |
| IPv6 Domain Name: | wb38.com |
| Primary DNS Server: | |
| Alternate DNS Server: | |
| Alternate DNS Server 2: | |

### DNS Settings

| | |
|---|---|
| Connection Timeout: | 30 |
| Append Parent Domains: | Disabled |
| Append Parent Domains: | Enabled |
| Additional Search Domains 1: | |
| Additional Search Domains 2: | |
| Additional Search Domains 3: | |

### SLP:

| | |
|---|---|
| Version: | Software |
| Port Number: | 1 |
| Hop Limit: | 427 |
| Multicast Type: | Active |
| Initial Delay Factor: | 1 |
| Retry Factor: | 0.5 |
| Retry Timeout: | 1.0 |
| Retry Factor: | 2.0 |
| Retry Timeout: | 3.0 |
| Retry Factor: | 1 |
| Retry Timeout: | 60 |
| Multicast Radius: | Disabled |
| Active DA Discovery: | Disabled |
| Static DA: | |
| Scope: | DEFAULT |
| Static DA: | |
| Scope: | |
| Static DA: | |
| Scope: | |
| Static DA: | |
| Scope: | |
| Service Type Template: | 1 |
| Maximum Results: | 256 |
| MTU: | 400 |

### AppleTalk:

| | |
|---|---|
| Status: | Disabled |
| Name: | XRX_4080AAB71888 |
| Zone: | |
| Printer Type: | LaserWriter |

### Microsoft Networking:

| | |
|---|---|
| SMB Host Name: | Software |
| Printer Shared Name: | 4080AAB71888 |
| Workgroup: | PRINTER |
| Number of Connections: | WORKGROUP |
| Connection Software: | 20 |
| Transport: | Both |

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3/28/18
Ticket # ER3633314
Audible alarm equipment no longer available
Fax service not available
Fax Machine Model # WC5645

[illegible]

testing

In the first six months of fiscal 2016 the federal government collected $40 233,320 000 (in constant 2017 dollars) in excise taxes In the first six months of this fiscal year it has collected only $37 488 000 000—a decline of $2 745 320 000

The federal government run its $526 855 000 000 deficit through the first six months of this fiscal year because while the Treasury was collecting $1,473 137 000 000 in total taxes It was spending $1 999 991 000 000

Because there were 153,000 000 people employed in the United States in March according to the Bureau of Labor Statistics the $1 473 137 000 000 in taxes the federal government has collected so far this fiscal year equals about $9 628 for every person with a job

The $526 855 000 000 deficit equals about $3 443 for every person with job

(http://cdn.cnsnews.com/outlays_and_receipts-mts-chart.jpg) [3]

**Source URL:** http://www.cnsnews.com/news/article/terence-p-jeffrey/8953810000000-feds-collect-record-income-taxes-through-march

Cats!!!

Text from PDF

FUN

FAX

TEST

OH BOY!

Oh HAI
Mark!
2/1

Delivered by FaxCore

# Fax Transmission

**Attention to:-**
Name: test
Company:
Date: 2016 04-21
Time: 08:25 52 A

**From:-**
Name: System Admin
Company: PH Tech
Telephone:
Pages: 1

**RE:**

**Comments/Notes:**

Confidentiality Notice

This message is intended for the use of the individual or entity to which it is addressed and may contain information that is privileged, confidential and exempt from disclosure under applicable law. If you are not the intended recipient, any dissemination, distribution or copying of this facsimile is strictly prohibited. If you have received this facsimile in error, please notify us immediately at 503-362-2818 and send this facsimile back to PHTECH.

assurance wireless

## 3 FOR YOUR SECURITY

If you qualify, you need an Account PIN to access your account and a Secret Answer in case you ever forget you PIN. Please write them down for safekeeping.

**CHOOSE YOUR ACCOUNT PIN:**

- It must be 6 numbers long
- No more than 3 consecutive numbers in a row (1234 won't work)
- Do not repeat numbers next to each other (44 won't work)
- No symbols or letters (@#PRTE won't work)

**YOUR ACCOUNT PIN:**

☐ ☐ ☐ ☐ ☐ ☐

AND

**YOUR SECRET ANSWER:**

What is your favorite city?

Your Secret Answer: _____

**IMPORTANT INFORMATION ABOUT THE LIFELINE PROGRAM:** Assurance Wireless is a Lifeline supported service. Lifeline is a federal benefit, and only eligible subscribers may enroll. Consumers who willfully make false statements in order to obtain the benefit can be punished by fine or imprisonment or can be denied or removed from the program. One Lifeline supported service (land line or wireless) is available per household. A household is one or more individuals who live together at the same address and share income and expenses. A household is not permitted to receive Lifeline benefits from multiple providers. Violation of the one-per-household rule constitutes a violation of federal rules and will result in de-enrollment from the Lifeline program and potential prosecution by the United States government. Lifeline is a non-transferable benefit. Service cannot be transferred to any individual, including any member of your eligible, low-income consumer.

## 4 SIGNATURE

**By signing below, I certify under penalty of perjury that the information contained within this Application is true and correct to the best of my knowledge.**

- I participate in a qualifying federal Program or meet the income qualifications to establish eligibility for Lifeline. Proof of eligibility is required. I have provided the required documentation as listed in Section 2.

If I have provided a temporary address, I must notify Assurance Wireless within 30 days of any change of address. Assurance Wireless will attempt to verify every 90 days that I continue to reside at that address. If I do not respond to these address verification attempts within 30 days, I will be de-enrolled.

- I will inform Assurance Wireless within 30 days of the following, and may be subject to penalties if I fail to do so:
  - I move to a new address.
  - I no longer participate in the Lifeline qualifying Program or my annual household income exceeds 135% of the Federal Poverty Guidelines.
  - I become aware that my household is receiving more than one Lifeline benefit.
  - For any other reason, I no longer meet the criteria to receive Federal Lifeline support.
- I authorize Assurance Wireless and its agents to access any records (including financial records) required to verify my statements herein and to confirm my eligibility for Assurance Wireless service. I authorize state or federal agency representatives to discuss with, and/or provide information to, Assurance Wireless verifying my participation in public assistance Programs that qualify me for Assurance Wireless service.
- I authorize Assurance Wireless to provide access to or release any records required for the administration of Assurance Wireless service.
- I understand that the completion of this application does not constitute immediate approval for Assurance Wireless service.
- I acknowledge that providing false or fraudulent information to receive Lifeline benefits is punishable by law.

**You MUST place a check mark ☑ next to all 3 statements, then sign and date below.**

☐ 1. I certify that my household will receive only one Lifeline Assistance benefit (voice or wireless). To the best of my knowledge, my household (i) is not already receiving such a benefit, or (ii) if I currently receive a Lifeline discount from a different phone service provider, I consent to the transfer of my Lifeline benefit to Assurance Wireless and understand that once the transfer is complete, I will lose my Lifeline program benefit with my current phone service provider. AND

☐ 2. I understand that I may be required to re-certify continued eligibility for Lifeline at any time. Failure to do so will result in the termination of my Lifeline benefits. AND

☐ 3. I consent to have my personal identification information shared with the Universal Service Administrative Company (USAC) (the Lifeline Program administrator) and/or its agents for the purpose of confirming that neither I nor my household receives more than one Lifeline benefit.

**YOUR APPLICATION CANNOT BE APPROVED WITHOUT 3 CHECK MARKS AND YOUR SIGNATURE.**

**SIGNATURE** (Please use blue or black ink)

**TODAY'S DATE** ___/___/___

**PRINTED NAME**

STOP

- ☑ Have you provided your Date of Birth and your last 4 digits of SSN?
- ☑ Have you attached proof of eligibility? (if required)
- ☑ Have you checked all 3 statements above and signed the Application?

Your Application cannot be processed without all of the above.

you + hp

## FaxBack System Test

Thank you for choosing hp

## Other useful hp web sites

**www.hp.com/register**
Use this web address to register your HP product.

**www.hp.com/support**
Use this web address to obtain additional support for your product.

**www.hpshopping.com**
Use this web address to order supplies and accessories for your HP product.

## Help us help you

We're interested in your feedback on this fax verification process. Send your comments to:

**fax.feedback@hp.com**

hp invent

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www.hp.com

# Fax Document for testing
# please ignore..

DE Dieses fax ist nur ein test
bitte ignorieren Sie es

ES Este fax es solamente una prueba
no hace caso por favour de ella

FR Ce fax est seulement un essai
l ignorent svp

PT Este fax è somente um teste
ignora-o por favour

IT Questo fax è soltanto una prova
prego la ignora

RU Это факс лишь испытание
пожалуйста игнорируйте его

ZH-HK 傳真文件進行測試
請忽略

**DUMMY FAX DOCUMENT**

**NO CONTENT HERE**

NORTHERN Safety & Industrial

Mini Catalog

Sale prices End March 29, 2013

# DOLLAR DAYS

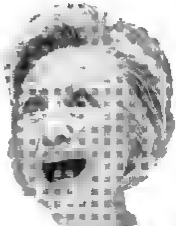
# TOP 7 FACTS

## UNCOVERED BY EX-FBI DIRECTOR JAMES COMEY'S TESTIMONY

1. TRUMP WAS NEVER UNDER INVESTIGATION
2. TRUMP NEVER INTERFERED WITH ANY FBI PROBES
3. TRUMP DID NOT COLLUDE WITH RUSSIA
4. RUSSIA HAD NO IMPACT ON THE 2016 ELECTION OUTCOME
5. COMEY LEAKED HIS OWN MEMO TO DAMAGE PRESIDENT TRUMP

6. EX-ATTORNEY GENERAL LORETTA LYNCH PRESSURED COMEY TO COVER FOR HILLARY CLINTON

TURNING POINT USA



7. THERE WAS SUFFICIENT EVIDENCE TO BRING CHARGES AGAINST HRC BUT COMEY CHOSE NOT TO DO SO

# AudioCodes ATA Connector
## FAX DELIVERY NOTIFICATION

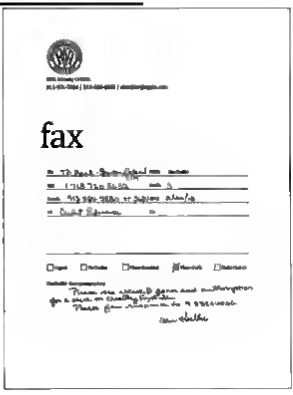
Account: FAXATA-D09464465
2/26/2018 12:41:00 PM

The following fax was **successfully** sent to the specified recipient

| | |
|---|---|
| **Fax Number:** | **17187205632** |
| Remote CSID | 7187205514 (station ID of receiving fax device) |
| Pages: | 3 |
| Status | No errors |

## FAX TRANSMISSION DETAILS

| | |
|---|---|
| Sent On: | 2/26/2018 12:49:26 PM |
| Duration: | 119 seconds |
| Speed: | 14400 bps |
| Retries: | 4 |
| Event ID | 47836 |



fax

FaxBack
VoIP Fax Solutions

Test

# Xerox® WorkCentre® 5945

Multifunction Printer

# Configuration Report

Printed on: Jan 15, 2018 at 23:12:44

xerox

## Common User Data

| | |
|---|---|
| Machine Name: | Xerox5945-05 |
| IP Address: | 10.30.76.252 |
| Machine Serial Number: | AJH456121 |
| Host Name: | XE7642F0B68 |
| System Modified Number: | 013.001.055.23000 |
| Machine URL: | http://10.30.76.252 |

## Machine Profile

| | |
|---|---|
| Decimal Name: | Xerox-PrinterSW-29 |
| Machine Serial Number: | 2000000140 |
| Asset Tracking: | Xerox-PrinterSW-29 |
| Customer Asset Tag: | Xerox-PrinterSW-29 |
| Service Name/Number: | Xerox-PrinterSW-29 |
| Controller/Engine Phone Number: | |
| Supplies Phone Number: | |
| System Administrator: | System Administrator Enter Name |
| Machine Modified: | 2nd Floor Hallway |

## Machine Hardware

| | |
|---|---|
| Fax Card: | Not Installed |
| Internal Fax Card: | Not Installed |
| Fax Card Memory Size: | 0 KB |
| Foreign Modified Card: | Not Installed |
| Hot Card Serial Port: | Installed |
| Hot Controller Flash Size: | 16 MB |
| DNC Memory Size: | 512 MB |
| Shelf: | Installed |
| Finisher Type: | Office Finisher LX (FIN) |
| Finisher Name: | Finisher |
| Finisher Folder: | Not Installed |

## General Setup

| | |
|---|---|
| Days Mode Timer: | 30 minutes |
| Energy Saver Mode: | Auto Activated |
| Timer Operation: | Not Enabled |
| Remote Modified Password: | Enabled |
| Mode Operation Timer Time: | 15:15 |
| E-mail Alert: | Enabled |
| Remote Reset: | Available |
| Billing Impression Mode: | All Impressions |
| Remote Config Modified: | Available |
| GMT Offset: | -5:00 |
| Remote Password: | Available |
| 3000: | Available |

## Software Versions

| | |
|---|---|
| System Modified: | 073.090.055.23000 |
| Modified Controller: | 073.090.23000 |
| Link Algorithm: | 073.090.23000 |
| Marking Engine: | 000.001.10.00 |
| Copy Controller: | 073.090.23000 |
| Document Feeder: | 1.5.0.011201 |
| Finisher: | 002.001.040 |
| Fax: | 003.011.000 |
| Copy Controller 01: | 073.088.23000 |
| Modified Controller 01: | 073.088.23000 |
| Modified: | 002.090.000 |
| Software Upgrade: | 073.090.23000 |

## Machine Upgrades

| | |
|---|---|
| Use Scanned Upgrade: | Settings 33.3816 16.25.15 |
| Installed Auto Upgrades: | Settings |
| Auto Upgrade Start Time: | Daily |
| Auto Upgrade Status: | 0.0.0.021 |

## Connectivity

### Mobile Workflow

| | |
|---|---|
| Remote Printing: | Number: |
| Mobile Printing Discovery: | Enabled |

### Physical Connectivity

**USB Settings**

| | |
|---|---|
| USB Connection Mode: | Enabled Both |
| Print Number: | |

**Wired**

| | |
|---|---|
| Ethernet MAC Address: | 0c03ba0f1d6d |
| Ethernet Speed/Duplex: | Auto |
| Wireless: | Disabled |

**TCP/IP**

| | |
|---|---|
| Security Mode: | |
| Encryption Algorithm: | |
| Status: | |

**NFC**

| | |
|---|---|
| NFC: | Disabled |

## Protocols

**Apple Talk**

| | |
|---|---|
| Name: | |
| Zone: | 3004f0f3d4d8fe681 |

**Protocols (cont.)**

**Register...**

| | |
|---|---|
| Print Mode Wanted: | Disabled |
| NDS Tree: | 0b0e03d4d9b7f |
| NDS Context: | Xerox_US_Corp |
| NDS Server: | Xerox_US_Contract |
| Remote Print Operation: | 0.0.0.0 |
| IPX Network Type: | IP |
| IPX External Number: | ethernet_auto |

**TCP/IP**

| | |
|---|---|
| IP Address: | Enabled |
| Subnet Mask: | 10.30.76.252 |
| Router/Gateway: | 255.255.255.0 |
| Bonjour(R) Addressing: | 10.30.76.1 |
| DHCP Server: | Disabled |
| DHCP Lease Duration: | 172.16.0.33 |
| DHCP Requests: | Last Poll: 2/12/2018 07:20:48 PM |
| DHCP Broadcasts: | Disabled |
| Self Assigned IP Address/Cache: | Enabled |
| Self Assigned IP Address: | 169.254.0.33 |

**TCP/IP v6**

| | |
|---|---|
| Link Local Enabled: | Disabled |
| Use Router Supplied Prefix: | Enabled |
| Number: Global Address 1: | |
| Number: Global Address 2: | |
| Manual Address: | |
| DHCP Addressing: | Use DHCP as directed by a router |
| DHCP Address: | |
| Remote Gateway: | |

**DNS Settings**

| | |
|---|---|
| Domain Name Wanted: | Xerox5945-05 |
| Preferred Host Name: | |
| Requested Domain Name: | xerox.local |
| Preferred Domain Name: | |
| Bonjour(R) Enabled: | Enabled |
| Remote DHCP Server and DNS Registra... | Number: |
| Primary DNS Server: | 10.40.65.1 |
| Alternate DNS Server 1: | 10.30.76.3 |
| Alternate DNS Server 2: | |
| Connection Enabled: | 8 |
| Append Domain Enabled: | Enabled |
| Append Parent Enabled: | Disabled |
| DNS Dynamic Update Enabled: | Disabled |
| Time To Live: | Enabled |
| Secure HTTP Port Number: | 443 |
| Proxy Server: | |
| Proxy Server Enabled: | Disabled |
| Port: | 8.0.1.0.0.0.0 |
| IPP Number Base: | Enabled |
| | http://10.30.76.252:631 |

**IPP**

| | |
|---|---|
| IPP v1.1+2: | Enabled |
| IPP v2.: | Enabled |

**LPR/LPD**

| | |
|---|---|
| Port Number: | Enabled |
| Port Number: | 515 |
| Port Number: | Enabled |
| Port Number: | Enabled |

**Port 9100**

| | |
|---|---|
| Port Number: | Enabled |
| Port Number: | 9100 |
| Bidirectional: | Enabled |
| Time-out (sec): | 300 |
| Port Number: | Disabled |

**SNMP**

| | |
|---|---|
| Primary SNMP Port: | 2000000000 |
| Modified SNMP Address: | 2000000000 |
| Remote Discovery Port: | |
| Login Credentials: | None |
| Secure Connection (SNMP): | Disabled |
| SNMP Enterprise: | Disabled |
| Perform Search on Mapped Printer: | Xerox_Generic_SmartWorkspaceHome |
| Send Search by Workflow Path: | Xerox_SmartSpace |
| Remote Login Enabled: | |
| Enable Email Filter Name: | Disabled |
| Address Book Filter: | |
| Line 20 Name Filter Name: | Disabled |
| Line 20 Query Filter: | |

**SMTP**

| | |
|---|---|
| SMTP Name: | smtp.ad.fsu.fsu.com |
| Email Address: | xeroxmailbox@admin.fsu.edu |
| Line Number for Dial: | 16240 |
| Number of Frequency: | 1 |
| Total Job Size Max: | Number: |
| Job Splitting Boundary: | Page Boundary |
| Password for Auto E-mails: | System |
| Confirmation by Mailbox User: | System |

**POP3**

| | |
|---|---|
| POP3 Name: | 0.0.0.0:110 |
| Password E-mail on POP3: | Enabled |
| Send Scanned on Enabled: | Enabled |
| Secondary E-mail Name Name: | Number |

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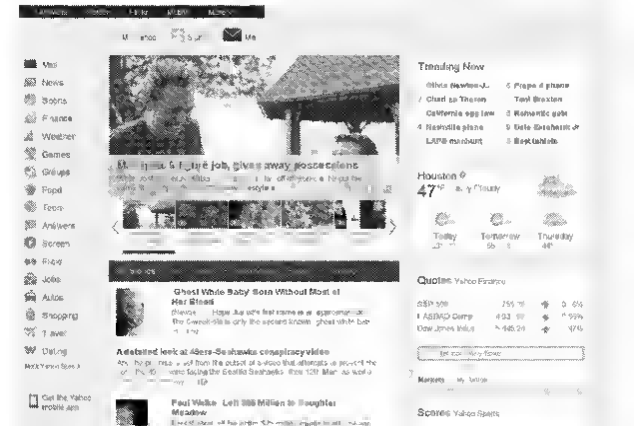
Trending Now
Houston
47°F
Today
Tomorrow
Thursday
Quotes Yahoo Finance
Markets
Scores Yahoo Sports
Ghost Whale Baby Sora Without Most of Her Blood
Paul Walker Left $10 Million to Daughter
Meadow

Hello World!

Welcome to

# Windows® Fax and Scan

*One place to scan and fax your documents*

**FAX:** You can send and receive faxed documents on your computer without using a fax machine. You can also print, e-mail, or save a copy of your faxes.

To get started:

1. Connect a phone line to your computer.

   If your computer needs an external modem, connect the phone to the modem and then connect the modem to your computer.

2. On the toolbar, click **New Fax**.

3. Follow the instructions in the setup wizard to connect to a fax modem and then, when you're finished, create your fax.

To connect to a fax server instead of a modem, contact your system administrator. For more help with faxing, click the **Help** button on the toolbar.

**SCAN:** After you add a scanner to your computer, you can preview documents or pictures before you scan them, and then adjust your scan settings for better results. You can also fax or e-mail scanned files to someone else.

To get started:

1. Connect your scanner to your computer by following the instructions that came with your scanner, and then place a document or picture on the scanner.

2. In Windows Fax and Scan, at the bottom of the left pane, click **Scan**.

3. On the toolbar, click **New Scan**.

4. Choose the scan settings you want to use, and you're ready to scan.

Use the options on the toolbar to fax, e-mail, print, or copy scans at any time. For more help with scanning, click the **Help** button on the toolbar.

TO 1888- 473 2963

SEND ME A
Test PAGE

TO
727 386-5403

es

-key blank-on-download-digital-gather-to-page

Purpose

Employee Information

Name

Social Security Number

Employee ID

Department

Position

Manager

Pay Period

From

To

| Date | Account | Description | Hotel | Transport | Fuel | Meals | Phone | Entertain | Misc. | TOTAL |
|---|---|---|---|---|---|---|---|---|---|---|
| | | | | Test | | $ | | | | $ |
| | | | $ | $ | $ | $ | $ | $ | $ | |

Subtotal $

Advances

TOTAL $

Approved By

Notes

All receipts should be attached

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HP Officejet 6210 Series
Personal Printer/Fax/Copier/Scanner

Log for
Brwer
403-2083429
03 Aug 2011 7:57PM

**Last Transaction**

| Date | Time | Type | Identification | Duration | Pages | Result |
|---|---|---|---|---|---|---|
| 3 Aug | 7:55PM | Fax Sent | 18884732983 | 0:00 | 0 | No answer |

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Notaire Notary

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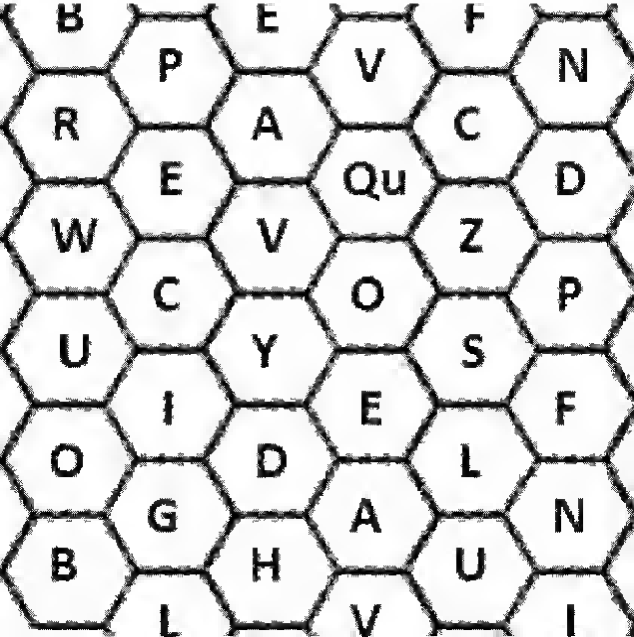
B E F
P V N
R A C
E Qu D
W V Z
C O P
U Y S
I E F
O D L
G A N
B H U
L V I

## APPLICATION

**Surface Preparation** ... *Existing (Old) Concrete* Concrete surface must be clean and dry with all stains, oil grease, dust and dirt removed prior to application We recommend ULTRITE DEGREASER® from W. R. MEADOWS for cleaning

*New Concrete* CS-309-25 should be applied when surface water has completely disappeared and the concrete surface will not be altered by walking workmen

**Application Method** ... Use a sprayer or short-nap roller to apply a uniform film Avoid puddling in low areas If puddles occur brush or roll them out A standard industrial-grade sprayer equipped with a neoprene hose and gaskets, as well as a 5941 spray nozzle (or equivalent) is recommended for best results.

For optimum performance, apply first coat at 600 ft.²/gal. After the first coat has thoroughly dried, apply a second coat at 600 ft.²/gal. NOTE The second coat should be applied at a right angle

**Drying Time** ... CS-309-25 dries quickly Drying times may be extended depending upon initial mixing rate, temperature, humidity and project conditions Restrict foot traffic for at least three hours Twelve hours is preferable.

**Cleanup** ... Application equipment should be cleaned promptly after use with xylene or toluene.

**For most recent data sheet, further LEED information, and MSDS, visit www.wrmeadows.com.**

## PRECAUTIONS

DO NOT DILUTE FOR EXTERIOR APPLICATION ONLY Surfaces treated with CS-309-25 may become slippery under certain conditions.

CS-309-25 should not be applied during high temperature conditions or direct sunlight These conditions cause rapid evaporation, which does not allow the film to form properly Under these conditions, the film may peel, bubble, and or turn white (bluish). CS-309-25 should not be applied to concrete exposed to excessive moisture. Entrapped moisture or solvent-based sealer may cause the film to peel and/or turn white (bluish)

Do not apply CS-309-25 if the temperature of the concrete is below 40° F (4° C) CS-309-25 may be used on refired concrete, but mottling may occur Do not use on dense or non-porous surfaces .e. brick stone etc

Concrete containing calcium chloride will remain dark longer when treated with CS-309-25 Concrete floors properly cured with CS-309-25 meet section 8 5 "Adhesion of Test Cements" of ASTM C 1315 For other specifications, secure the approval of the parties to resilient flooring manufacturer before applying CS-309-25 The specifier and user shall determine the suitability of product for specific applications and assume all responsibility in connection therewith.

CS-309-25 is a membrane-forming sealer All membrane-forming sealers may darken concrete or magnify imperfections caused by variations in the pozzolanic and/or finishing of the concrete

## HEALTH HAZARDS

Prolonged inhalation of vapors in excess of permissible exposure limits may result in symptoms of transient central nervous system depression Direct contact with the product may result in irritation of the skin and eyes. Product vapors may also cause irritation. **CS-309-25 is combustible** Remove ignition sources prior to use Empty containers may hold combustible vapors. Handle empty containers as combustible liquids. In the event of a spill, contain the product apply absorbents and place in sealed containers. In the event of a fire, contain all run-off water Refer to Material Safety Data Sheet for complete health and safety information

## LIMITED WARRANTY

"W. R. MEADOWS, INC warrants at the time and place we make shipment, that material will be of good quality and will conform with our published specifications in force on the date of acceptance of the order" Read complete warranty Copy furnished upon request.

## Disclaimer

The information contained herein is included for illustrative purposes only and to the best of our knowledge, is accurate and reliable. W. R. MEADOWS, INC cannot however under any circumstances make any guarantee of results or assume any obligation or liability in connection with the use of this information As W. R. MEADOWS, INC has no control over the use to which others may put its product It is recommended that the product be tested to determine if suitable for specific application and/or our information is valid In a particular circumstance Responsibility remains with the architect engineer, contractor and owner for the design, application and proper installation of such product Specifier and user shall determine the suitability of product for specific application and assume all responsibilities in connection therewith

© W. R. MEADOWS 2002

Wednesday October 20, 2010

| Reservation Confirmation |
| --- |
| FF987F78-3135-285 |
| Created: 10/20/2010 10:30:40 GMT |
| Booking Source: PMS |

Dear Ajesh Patel,

[illegible]

[illegible]

| [illegible] | | | |
| --- | --- | --- | --- |
| Description | Old Town [illegible] | State | California |
| Address | Test | Postal | 4258425 |
| City | Albion | Country | USA |
| Email Address | [illegible] | Telephone | 8888888888 |

| [illegible] | | | |
| --- | --- | --- | --- |
| Payment Method | | Card | Visa [illegible] |

| [illegible] | | | |
| --- | --- | --- | --- |
| Number of Rooms | 2 | Number of Nights | 1 |
| Check In Date | October 20, 2010 | Check Out Date | October 20, 2010 |

| [illegible] | | | |
| --- | --- | --- | --- |
| Ref Number | Mr Tom | Last Name | [illegible] |
| Room Total | Bed | Queen | |
| | Rate | $80.00 | |

Sub-Total: $80.00
Tax (8.75%): $6.50 -- Fees ($4.00) -- Total: $73.50

Note: Taxes/Fees Subject to Change

| [illegible] | | | |
| --- | --- | --- | --- |
| Ref Number | Mr [illegible] | Last Name | Tester |
| Room Total | Bed | Queen | |
| | Rate | $80.00 | |

Sub-Total: $80.00
Tax (17.50%): $5.25 -- Fees ($4.00) -- Total: $89.25

Note: Taxes/Fees Subject to Change

Special Request: 0

[illegible]

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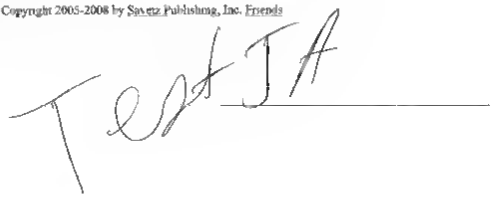
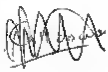


*From "Twilight IV Breaking Dawn Part 1"*

# Turning Page

by

CURTIS O'NEAL



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musicnotes.com

TEST

HFC

**Guardian Angel Prayer**

Angel of God, My Guardian Dear
to whom God's love commits me here.

Ever this day be at my side
to light and guard and rule and guide.

Amen

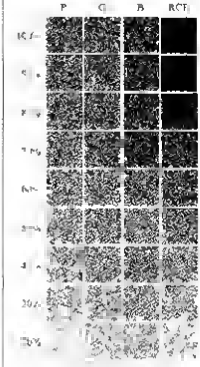
888 8 77 165

test

Test

I-85 [illegible] 1239

# Test Page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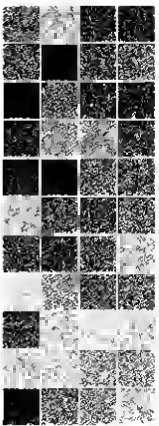
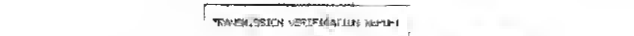
B
RGB



The quick brown fox jumps over the lazy dog
The quick brown fox jumps over the lazy dog
The quick brown fox jumps over the laz
The quick brown fox jumps over th
The quick brown fox jumps ove
The quick brown fox jump


TRANSMISSION VERIFICATION REPORT
NAME
FAX
SER.#
DATE, TIME
FAX NO. /NAME
3583381239

accounting managers assess policies and the flow of money from within a business. financial controllers act as the lead accounting executive, and certified public accountants help control money flow for groups and organizations.

Of the three, I'd choose to be an internal accounting manager. Job responsibilities include assessing policies, procedures, and controlling the structure of the financial department, while duties are to plan and conduct financial and operational reviews. The average salary is $85,900 and 4-6 years of experience are required.

# X-TREME SURPLUS

- MILITARY
- POLICE
- PAINTBALL
- RENTALS
- HUNTING

28 S. GRAND AVE., MONTROSE

249-9865

Company

# Fax

TO:Who ever reads this

Fax Number:1 Date: 11/13/10

---

From: Patrick Kelly III

Number of pages including cover: 1

Regarding: Test fax

Dear You,

I am sending the test fax to you in the hopes that I fixed my fax machine ,If you get this then at least it is working again !! if it is not working then I am out of luck with this piece of @#$% !!

Sincerely yours,

Patrick Kelly

TRANSMISSION VERIFICATION REPORT

| | |
|---|---|
| TIME | 11/02/2009 09:38 |
| NAME | FISHER |
| FAX | 7784517578 |
| TEL | 7784517578 |
| SER.# | HBN3135117 |

| | |
|---|---|
| DATE,TIME | 11/02 09:37 |
| FAX NO./NAME | 18894732963 |
| DURATION | 00:00:35 |
| PAGE(S) | 01 |
| RESULT | OK |
| MODE | STANDARD ECM |

Test

123

**Prayer to St. Joseph over 1900 years old**

**O St Joseph whose protection is so great, so strong, so prompt before the Throne of God, I place n you all my interests and desires O St Joseph do assist me by your powerful Intercession and obtain for me from your Divine Son all spiritual blessings through Jesus Christ. Our Lord, so that having engaged here below your Heavenly power I may offer my Thanksgiving and Homage to the most Loving of Fathers O St Joseph I never weary contemplating you and Jesus asleep in your arms I dare not approach while He reposes near your heart Press him in my name and kiss His fine Head for me, and ask Him to return the Kiss when I draw my dying breath. St. Joseph, Patron of departing souls, pray for us. Amen**

***Say for nine consecutive mornings for anything you may desire. It has seldom been known***

***to fail.***

**This prayer was found in the fiftieth year of Our Lord Jesus Christ. In 1500 s it was sent by the Pope to Emperor Charles when he was going into battle**

**Whoever reads this prayer or bears it or carries it, will never die a sudden death, nor be drowned, nor will poison take effect on them They will not fall into the hands of the enemy nor be burned in any fire, nor will they be defeated in battle.**

**Make this prayer known everywhere**

Imprimatur
Most Rev. George W. Ahr
Bishop of Trenton

Back to Ft Cuno Sparta Page

SBA

FOR INFORMATION CALL

EWR

07/16/2013

QA716-3

SERVICE STATION TRACKING NUMBER

**QA716-3**

ORIGIN DEST

EWR JFK

Corporate Headquarters, 233 Crossways Park Dr

Woodbury NY 11797 800-343-5548

SHIPPER 123

ShipperTest

10 Main Rd,

Edison, NJ, 08817

9170119383

RECEIVER 999

120 Second St,

Brooklyn NY 112 8,

7150930191

BILL TO:

BILLING TO [redacted] RECEIVER

DELIVERY INSTRUCTIONS, MSD by 07/31/2013

Test Special Instructions

| PIECES | DESCRIPTION | WEIGHT | DIMENSIONS LENGTH | WIDTH | HEIGHT |
|---|---|---|---|---|---|
| | | | | | |

Must Deliver No Later Than 07/31/2013

RECEIVER SIGNATURE

PRINT RECEIVER'S NAME

TELEPHONE NUMBER

**QA716-3**

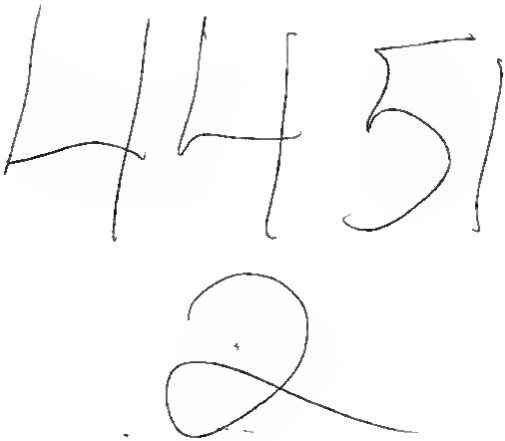
**TRACKING NUMBER**

DATE

TIME

**TOTAL CHARGES**

Thrs is a new test



# Tester faxer

NW Montessori HC Inc.
4203 Balcones Woods Dr
Austin, TX 78759

Barbara Flynn
PO Box 27135
Austin TX 78755 2135

## The Vegetable Soup Diet

- The original soup recipe makes 18 cups of basic vegetable soup.
- Begin by coating a large stock pot or soup kettle with nonstick cooking spray
- Add 1 cup sliced carrots
- 4 peeled and chopped onions
- 5 sliced stalks of celery
- 1 pound of sliced mushrooms
- 3 chopped bell peppers
- 2 tablespoons of minced garlic
- Cook over medium heat, stirring frequently for about 10 minutes
- Then add 28 ounces of undrained canned diced tomatoes
- 1 pound of shredded green cabbage
- 1 pound of fresh green beans
- 64 ounces of chicken broth
- 8 quarts of water
- Season to taste with salt and pepper, then bring the soup to a boil. Reduce the heat and cover the soup. Allow it to simmer for 10 minutes
- Then add 12 ounces of baby spinach leaves
- 1 pound of sliced zucchini
- Cover and simmer 10 minutes more. Customize the vegetables in the recipe, leaving out anything you don't care for and adding those you prefer, ex: red potatoes, beans, corn, avocado or peas

P

9335

FAX

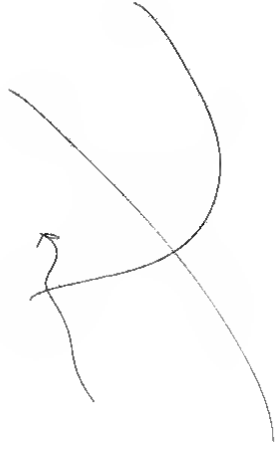
TEST

#2

1-855-330-1239

CHN
FAX
TEST

Testing



15 fr got 3 seconds, which is plenty fast for me.If i go above i get the same 4 or higher seconds resp. fr try which one works the best
I havent increased the pipelining above the default,fr just set it to true and please be sure to ignore that TRIM command above,it's not useful
Mozilla 27 Linux mint 16 Mate (64bit)
very usefull..it does work, I have an older computer(intel pentium dual cpu at 2.0 GH whit 993 on RAM) and firefox was takine forever to open pages and new tabs, whit this tweak now is running way faster than before, thanks a lot
)

7
[illegible]

Free & Open Source

# ICTFAX

http://ictfax.org/

**Email to FAX**
**FAX to Email**
**Web to FAX**

TEST PAGE 1

**ICT Innovations**

http://www.ictinnovations.com/

Test

Perform
Hold exercise for 15 Seconds
Rest 30 Seconds between sets

Perform
Hold exercise for 15 Seconds
Rest 30 Seconds between sets



Perform
Hold exercise for 15 Seconds
Rest 30 Seconds between sets



Perform
Hold exercise for 15 Seconds
Rest 30 Seconds between sets

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Entries (RSS)

# FAX TEST

M4 - 5 - East

LC

# FAX

**To: TESTING FAX**
Company: test
Fax: 16563301239
Phone:

**From:**
Fax:
Phone:
E-mail: ben.grady@interpublic.com

**NOTES:**

test

**Date and time of transmission:** Friday, October 30, 2015 5:48:56 AM
**Number of pages including this cover sheet:** 01

# F A X

To:
Fax number:

From:
Fax number:

Date:

Regarding:

Phone number for follow-up:

**Comments:**

YEAH!

CHILD NUTRITION /FOOD SERVICES DEPARTMENT

## Transport Temperature Log

**Instructions:** List date, food item, temperature and time when item is taken from oven and placed in transport box, Temperature and time when placed in holding oven.

MONDAY

| Date | Food Item | Transport Site | | Receiving Site | | Corrective Action Taken | Initials | Verified By Date |
|---|---|---|---|---|---|---|---|---|
| | | Time | Temp | Time | Temp | | | |
| | | | | | | | | |
| | | | | | | | | |
| | -LUNCH- | | | | | | | |
| | CHEESE BURGER | | | | | | | |
| | MOJO POTATO | | | | | | | |
| | CHEESE PIZZA | | | | | | | |
| | GARDEN BAR | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | -BK- | | | | | | | |
| | SAUSAGE/EGG BISCUIT | | | | | | | |
| | YOGURT | | | | | | | |
| | CINN GRAHAMS | | | | | | | |
| | CEREAL | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

CHILD
BULLY

TEST
FAX

AIR HANDLER SCHEDULE

TAG	SERVING	AIRFLOW		CHILLED WATER COOLING COIL						STEAM HEATING COIL			
		TOTAL AIRFLOW (CFM)	TOTAL S.P. (IN. WG)	EAT DB (DEG F)	EAT WB (DEG F)	LAT DB (DEG F)	LAT WB (DEG F)	EWT (DEG F)	LWT (DEG F)	EAT DB (DEG F)	LAT DB (DEG F)	STEAM PRESSURE (PSI)	VOL./PH
AHU 3A	2ND FLOOR WEST	[illegible]	2.250	76.0	64.0	[illegible]	[illegible]	[illegible]	55	54.4	95.0	5.0	208V/3PH
AHU 4A	FRONT ST. LOBBY	[illegible]	.750	77.0	64.7	[illegible]	[illegible]	39	55	61.9	95.0	5.0	208V/3PH
AHU 6	MARKET ST LOBBY	3350	1.750	77.0	64.7	51.0	[illegible]	39	55	61.9	95.0	5.0	208V/3PH
AHU 7A	332 COURTROOM 3 (V)	[illegible]	3.250	76.0	65.0	51.0	[illegible]	39	[illegible]	[illegible]	95.0	5.0	208V/3PH
AHU-7B	522 COURTROOM 5 (V)	[illegible]	2.750	[illegible]	[illegible]	51.0	50.5	39	[illegible]	52.2	95.0	5.0	208V/3PH
AHU-7C	5_0 COURTROOM	2920	2.750	81.2	[illegible]	51.0	50.0	39	[illegible]	49.3	95.0	5.0	208V/3PH
AHU 7D	212 COURTROOM 8 (V)	[illegible]	[illegible]	80.7	66.5	51.0	50.0	39	[illegible]	51.0	95.0	5.0	208V/3PH
AHU-8	1-2 NE IND UNITS	[illegible]	3.000	76.0	65.0	50.0	48.5	39	55	54.0	95.0	5.0	208V/3PH
AHU 9	501 COURTROOM 1 (I)	[illegible]	.750	81.0	67.1	50.0	48.5	39	55	48.0	95.0	5.0	208V/3PH
AHU 10A	LAW LIBRARY 4	3225	2.070	76.0	65.0	51.0	50.0	39	55	54.0	95.0	5.0	208V/3PH
AHU 10B	3RD FL WEST (RMS 343, 346, 386, 387, 353)	2175	2.750	76.0	66.0	51.0	50.5	39	55	54.0	95.0	5.0	208V/3PH
AHU 10C	330 COURTROOM 2 (II)	[illegible]	3.000	76.0	66.0	51.0	50.0	39	55	[illegible]	95.0	5.0	208V/3PH
AHU-10D	301 COURTROOM 3 (I)	[illegible]	2.750	[illegible]	65.5	51.0	50.5	39	[illegible]	50.0	95.0	5.0	208V/3PH

AHU 7 = 12,605

AHU 10 - 13,105

Test

Fax

Testing form
Amy!!!!!!!!!!!!!!!!!!!!
!!!!!!!
Testing

**Integrity Home Care Ltd**
7055 Engle Rd Building 2
Middleburg Heights, Ohio 44130

| | |
|---|---|
| To | Fax toy |
| Fax number | 1 888 877 1655 |
| | |
| From | Integrity Home Care Ltd. |
| Fax number | 440-877 1700 |
| Business phone | 440-877-2800 |
| Home phone | |
| | |
| Date & Time | 2/11/2014 5 23 39 PM |
| Pages | 1 |
| Re | Integrity Test 3 |

$$\frac{1}{2}\sin x + \cos x$$

07/12/2012 14:56 FAX

**********
*** ERROR TX REPORT ***
**********

INCOMPLETE TRANSMISSION

| | |
|---|---|
| TX/RX NO | 0021 |
| DESTINATION NUMBER | 1888771655 |
| DESTINATION ID | |
| ST. TIME | 07/12 14:56 |
| COMMUNICATION TIME | 00'00 |
| PAGES SENT | 0 |
| RESULT | NG #018 |
| | LINE BUSY |

**Tags Restaurant & Tavern**
PO Box 15, Rte. 352, Big Flats, NY 14814
(607) 562-7683 Fax (607) 562-3412

| To: | Date: |
|---|---|
| | |
| From: | Pages Inc. Cover: |

MESSAGE:

**MedfordNotary.com**
4327 S Stage Rd, Medford OR 97501-9543
Phone: 541-234-4611 Fax: 541-234-4611

# FAX COVER SHEET

**To**

Phone:

Company Name:

Fax:

**From:**

Phone:

Company Name:

Fax: 541-234-4611 (MedfordNotary.com)

Number of Pages: (Not Including This Cover Sheet)

Urgent?

Action Requested:

TEST 3

DRAW A CAT

TEST 2

Ky njerëzim mërmaan informacionet të rëndësishëm Ky njerëzim mërmaan informacionet të rëndësishëm për mëlligrim ose mëlligrimin tuaj nëpërmjet Oscar. Komandoni për ta të rëndësishme në kohë qytetin. Mund t'u shoni të mërmaani vepsim kreunda shtetet të caktuara për të mbuluar kosto shëndetësore. Ne ose për mërmën. Kam të drejtë të marrë lehtë informacion dhe mbrojtës falas në gjuhën tuaj. Telefoni numër 1-855-OSCAR-55.

1-855-OSCAR-55

Canje fundamentales importantes Es importante que entienda la información importante sobre su plan de salud Oscar y su cobertura. Puede llamar a Oscar al 1-855-OSCAR-55 y solicitar hablar con un representante en español.

Zhvillimet kryesore të rëndësishme Informacioni i rëndësishëm shëndetësor Ju duhet të kuptoni planin tuaj shëndetësor Oscar dhe mbulimin tuaj. Ju mund të telefononi 1-855-OSCAR-55 dhe të kërkoni të flisni me një përfaqësues në shqip.

Изменения, которые важно знать Важно понимать информацию о вашем медицинском плане Oscar и о том, что он покрывает. Вы можете позвонить в Oscar по номеру 1-855-OSCAR-55 и попросить соединить вас с представителем, говорящим по-русски.

Ang mahahalagang pagbabago Mahalagang maunawaan ang impormasyon tungkol sa inyong planong pangkalusugan ng Oscar at kung ano ang saklaw nito. Maaari kayong tumawag sa Oscar sa 1-855-OSCAR-55 at hilingin na makausap ang isang kinatawan na nagsasalita ng Tagalog.

Cambios importantes que debe conocer Es importante que entienda la información importante sobre su plan de salud Oscar y su cobertura. Puede llamar a Oscar al 1-855-OSCAR-55 y solicitar hablar con un representante en español.

Cet avis contient des informations importantes. Cet avis contient des informations importantes concernant votre mutuelle et votre couverture par l'intermédiaire d'Oscar. Rechercher les dates clés dans le présent avis. Vous devez vous être inscrit pour pouvoir avoir une couverture applicable afin de consulter votre couverture santé au cours de l'année. Vous avez le droit d'obtenir des informations et de l'aide dans votre langue gratuitement. Appelez le 1-855-OSCAR-55.

Diese Benachrichtigung enthält wichtige Informationen Diese Benachrichtigung enthält wichtige Informationen bezüglich Ihres Antrags auf Krankenversicherungsschutz über Oscar. Suchen Sie nach wichtigen Terminen in dieser Benachrichtigung. Es ist möglicherweise notwendig, bis zu bestimmten Stichtagen zu handeln, um Ihren Krankenversicherungsschutz oder Hilfe mit den Kosten zu behalten. Sie haben das Recht, kostenlose Hilfe und Informationen in Ihrer Sprache zu erhalten. Rufen Sie an unter 1-855-OSCAR-55.

Αυτή η ειδοποίηση περιλαμβάνει σημαντικές πληροφορίες Αυτή η ειδοποίηση περιλαμβάνει σημαντικές πληροφορίες σχετικά με την αίτησή σας ή την κάλυψή σας από την Oscar. Εδώ, θα βρείτε βασικές ημερομηνίες. Ενδέχεται να χρειαστεί να ενεργήσετε εντός συγκεκριμένων προθεσμιών για να διατηρήσετε την κάλυψη υγείας ή την υποστήριξη ενός με κάποιο κόστος. Έχετε το δικαίωμα να λάβετε δωρεάν τις πληροφορίες και βοήθεια χωρίς καμία χρέωση. Καλέστε στον αριθμό 1-855-OSCAR-55.

આ સૂચનામાં મહત્વની છે આ સૂચના તમારી સ્વાસ્થ્ય યોજના Oscar માટેની અરજીની વિશે માહિતી ધરાવે છે આ સૂચનામાં મહત્વની તારીખો જુઓ. તમારે તમારા કવર કવરેજ ચાલુ રાખી મેળવી અટકાવી અમલવારીઓની જરૂર પડી શકે છે તમને તમારી ભાષામાં વિશેષ મદદ અને મફતમાં માહિતી મેળવવાનો અધિકાર છે 1-855-OSCAR-55 પર ફોન કરો.

Aviso importante Este aviso contiene información importante sobre su solicitud de cobertura de seguro médico de Oscar y su cobertura. Busque fechas importantes en este aviso. Es posible que deba tomar medidas dentro de ciertos plazos para mantener su cobertura de salud o ayuda con los costos. Tiene derecho a recibir información y ayuda en su idioma sin costo alguno. Llame al 1-855-OSCAR-55.

Ang mahahalagang pagbabago Mahalagang maunawaan ang impormasyon tungkol sa inyong planong pangkalusugan ng Oscar at kung ano ang saklaw nito. Maaari kayong tumawag sa Oscar sa 1-855-OSCAR-55 at hilingin na makausap ang isang kinatawan na nagsasalita ng Tagalog.

Cambios importantes que debe conocer Es importante que entienda la información importante sobre su plan de salud Oscar y su cobertura. Puede llamar a Oscar al 1-855-OSCAR-55 y solicitar hablar con un representante en español.

Cambiamenti importanti da conoscere È importante comprendere le informazioni importanti sul piano sanitario Oscar e sulla copertura. Puoi chiamare Oscar al numero 1-855-OSCAR-55 e richiedere di parlare con un rappresentante che parla italiano.

Ważne zmiany, o których należy wiedzieć Ważne jest zrozumienie informacji o planie zdrowotnym Oscar i zakresie ubezpieczenia. Można zadzwonić do Oscar pod numer 1-855-OSCAR-55 i poprosić o połączenie z przedstawicielem mówiącym po polsku.

Mahahalagang pagbabago Mahalagang maunawaan ang impormasyon tungkol sa inyong planong pangkalusugan ng Oscar at kung ano ang saklaw nito. Maaari kayong tumawag sa Oscar sa 1-855-OSCAR-55 at hilingin na makausap ang isang kinatawan na nagsasalita ng Tagalog.

Cambios importantes que debe conocer Es importante que entienda la información importante sobre su plan de salud Oscar y su cobertura. Puede llamar a Oscar al 1-855-OSCAR-55 y solicitar hablar con un representante en español

Test Me

## APPENDIX A - LICENSE CLASSIFICATIONS

| | |
|---|---|
| A | General Engineering |
| B | General Building |
| C-2 | Insulation and Acoustical |
| C-4 | Boiler/Hot Water Heating, and Steam Fitting |
| C-5 | Framing and Rough Carpentry |
| C-6 | Cabinet, Millwork and Finish Carpentry |
| C-7 | Low Voltage Systems |
| C-8 | Concrete |
| C-9 | Drywall |
| C-10 | Electrical |
| C-11 | Elevator |
| C-12 | Earthwork and Paving |
| C-13 | Fencing |
| C-15 | Flooring and Floor Covering |
| C-16 | Fire Protection |
| C-17 | Glazing |
| C-20 | Warm Air Heating, Ventilating, and Air-Conditioning |
| C-21 | Building Moving and Demolition |
| C-23 | Ornamental Metal |
| C-27 | Landscaping |
| C-28 | Lock and Security Equipment |
| C-29 | Masonry |
| C-31 | Construction Zone Traffic Control |
| C-32 | Parking and Highway Improvement |
| C-33 | Painting and Decorating |
| C-34 | Pipeline |
| C-35 | Lathing and Plastering |
| C-36 | Plumbing |
| C-38 | Refrigeration |
| C-39 | Roofing |
| C-42 | Sanitation System |
| C-43 | Sheet Metal |
| C-45 | Electrical Sign |
| C-46 | Solar |
| C-47 | General Manufactured Housing |
| C-50 | Reinforcing Steel |
| C-51 | Structural Steel |
| C-53 | Swimming Pool |
| C-54 | Ceramic and Mosaic Tile |
| C-55 | Water Conditioning |
| C-57 | Well Drilling (Water) |
| C-60 | Welding |
| C-61 | Limited Specialty |
| ASB | Asbestos Abatement Certification |
| HAZ | Hazardous Substance Removal Certification |
| Law | Law and Business |



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Test fax from Circuit ID

Fax Fax Fax Fax Fax Fax

Fax Fax Fax Fax Fax Fax

Test Test Test Test

Test Test

your email Id, after you sign up the first thing that happens is that the protected code is sent to you and the receiver. Then the information or data that is to be transmitted is readied after the security test.

No establishment of the product is required to send the fax and the client can send or receive 1000 faxes and at the same time, enjoy other benefits as well

8. Send2fax

It is one of the easiest and the most hassle free services out there

Send2fax site is additionally acquainted with send free fax online, in which setup expense is invalid, no product establishment is required for sending fax. Which means you don't require to register before sending a fax. Additionally you can utilize this site's toll free number at no additional costs. Any sort of email record can be recovered ,for sending free fax at this site. All in all send2Fax is a great choice for once in a while

9- [illegible] Free Fax

This site permits clients to send 150 free faxes every month. You can get faxes from a fax machine when you experience their service. It is compatible with both PC and Mac. A desktop call controller – a widget /utility on your desktop make it simple to deal with the greater part of your faxes

10- [illegible]

## Lowcountry Community Players

**The Colleton Center**
(Old Hampton Street Elementary School)
494 Hampton Street Room 207
Walterboro South Carolina 29488
**(843) 608-4607**

# Babes in Toyland

## Holiday Musical Extravaganza

Christopher A. Williams, Artistic Director / Julia K. Crabb, Associate Director

# OPEN AUDITIONS

## NO EXPERIENCE NECESSARY

| Adults | Teens | Children |
|---|---|---|
| 6+ Males<br>7+ Females | 6+ Males<br>7+ Females | 10+ Males<br>10+ Females |

Saturday, October 1.....10 am - 2 pm
Saturday, October 8.....10 am - 4 pm
Sunday, October 9.....1 pm - 5 pm
Monday, October 10.....3 pm - 9 pm

## WANTED

ACTORS SINGERS DANCERS ARTISTS
MUSICIANS GYMNASTS OTHER TALENTS
TECH CREW & STAGE HANDS

## SHOWS

DEC 1 2 3 & 5 - 9 2011
TENTATIVE DATES
TIMES VARY

LEXMARK

*Thank you for choosing Lexmark*

Obrigado por ter escolhido a Lexmark.
Děkujeme, že jste si vybrali značku Lexmark.
Tak, fordi du valgte Lexmark.
Dank u dat u voor Lexmark hebt gekozen.
Kiitos, että valitsit Lexmarkin.
Nous vous remercions d'avoir choisi Lexmark.
Vielen Dank, daß Sie sich für ein Produkt von Lexmark entschieden haben.
Σας ευχαριστούμε που επιλέξατε τη Lexmark
Köszönjük, hogy a Lexmarkot választotta.
Lexmark 製品をお買い上げいただきまして 誠にありがとうございます。
Takk for at du valgte Lexmark.
Dziękujemy za wybranie produktu firmy Lexmark.
Благодарим Вас за то, что Вы выбрали Lexmark.
感谢您选购 Lexmark 产品
Gracias por elegir Lexmark.
Tack för att du valde Lexmark.
感謝您選購 Lexmark 產品
Lexmark 제품을 선택해 주셔서 감사 드립니다
Lexmark'ı tercih ettiğiniz için teşekkür ederiz
Lexmark شكرًا لاختيارك منتج

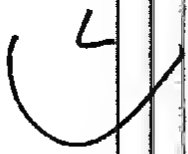
## Send a Fax Online

## As Low as €0.99 per 10 pages

**www.Fax.to**

4/7/15

Test Fax



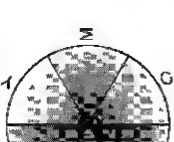
F. P. S.

magicJack

FAX TEST 10/25/17

Testbus.

# Printer Test Page




Color Wheel

Gray Ramp

1 Degree Radial Lines

## Imageable Area

PageSize: 8.5x11.0in
215.9x279.4mm

Lower-Left: 0.0x0.0in
0.0x0.0mm

Upper-Right: 8.5x11.0in
215.9x279.4mm

Resolution: 600x600dpi
255.1x255.1dpi/in

## Interpreter Information

PostScript Level 3
Version: 3011.103 (0)
Product: PS Normalizer framework
Serial #: 0

UNIX Printing System

# Printed Using CUPS v1.3.x

Copyright 2007 Apple Inc. All Rights Reserved. CUPS and the CUPS logo are the trademark property of Apple Inc. 1 Infinite Loop, Cupertino, CA 95014, USA

Need help? Contact your operating system vendor or visit http://www.cups.org

A test fax message

text is decreasing

SAMPLE
USPS
PRIORITY MAIL
ebay
9004
JANIS LEONAM
PO Box 784
Riverside CA 9

dear revenge shut up

**********
*** ERROR TX REPORT ***
**********

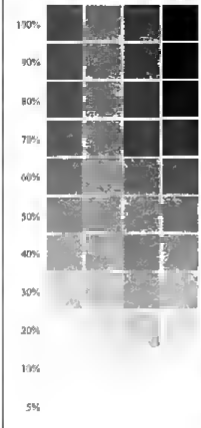
INCOMPLETE TRANSMISSION

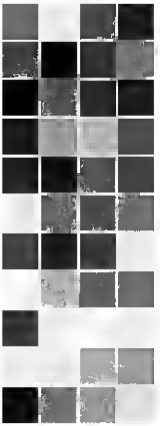
| | |
|---|---|
| TX/RX NO. | 0002 |
| DESTINATION NUMBER | 18884792963 |
| DESTINATION ID | |
| ST TIME | 05/02 20:30 |
| COMMUNICATION TIME | 00'00 |
| PAGES SENT | 0 |
| RESULT | NG STOP |

THE END

FAX !!?

# Test Page



The quick brown fox jumps over the lazy dog.
The quick brown fox jumps over the lazy dog.
The quick brown fox jumps over the lazy dog
The quick brown fox jumps over the lazy dog.
The quick brown fox jumps over the lazy dog
The quick brown fox jumps over the lazy dog
The quick brown fox jumps over the laz
The quick brown fox jumps over th
The quick brown fox jumps ove
The quick brown fox jump

NORTHWEST ARKANSAS PATHOLOGY ASSOCIATES, P.A.
3309 EAST LONGVIEW STREET FAYETTEVILLE AR 72703 (479) 442-0346
Pathology Report

| Patient Information | Physician Information | Accession # 20198 |
|---|---|---|
| Name Frances Kastner<br>Age 71 Sex Female<br>DOB 09/05/1945<br>Medical Record 45<br>Encounter# 4545 | Ordering Abir Ahmad MD | Date Collected N/A<br>Date Received 09/05/2018<br>Date Reported 09/05/2816 12.18 PM |

Location ltb loc 1

**HISTORY/CLINICAL DATA.**
Clinical Information

**TEST**

Pathology-F.

**SPECIMEN**
Is Pathology

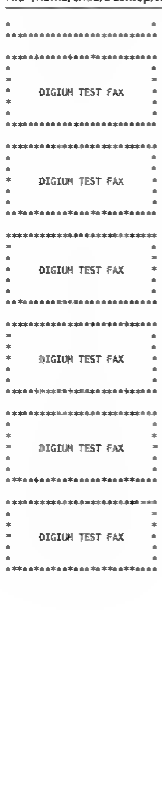
**MICROSCOPIC DESCRIPTION**
gfhsdf

**RESULTS:**
sdfsdf

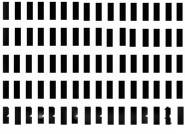
Electronically Signed Out
Helix Administrator 09/05/2016 12.16 PM

**COMMENT**
dfsdf

**SNOMED CODES:**
A M33200 (Retention, mucus), M43000 (Carmen mite), F1141 (Bulbar stomach), (Lower lip, zoo)
CPT 88305 88185
Diagnosis rendered at E. Longview st. Fayetteville, AR 72703 CLIA# c 4D9403875


DIGIUM TEST FAX
DIGIUM TEST FAX
DIGIUM TEST FAX
DIGIUM TEST FAX
DIGIUM TEST FAX
DIGIUM TEST FAX

Test



Test fix

Laurie's FAX!!!

1822 [illegible] 1655

ACCA

[illegible]

# Windows Printer Test Page

Congratulations!

If you can read this information, you have correctly installed your Dell 3100cn PS on SG-PC001

The information below describes your printer driver and port settings

| | |
|---|---|
| Submitted Time | 12 58 54 PM 1/16/2012 |
| Computer name | SG-PC001 |
| Printer name | HylaFAX |
| Printer model | Dell 3100cn PS |
| Color support | Yes |
| Port name(s) | WPNP: |
| Data format | RAW |
| Share name | |
| Driver name | PSCRIPT5.DLL |
| Data file | DLUXCN02.PPD |
| Config file | PSUI.DLL |
| Help file | PSCRIPT.HLP |
| Driver version | 6.00 |
| Environment | Windows x64 |

Additional files used by this driver:
C:\Windows\system32\spool\DRIVERS\x64\3\PSCRIPT.NTF
C:\Windows\system32\spool\DRIVERS\x64\3\PS_SCHM.GBL

This is the end of the printer test page.

$$\frac{1}{1+x^2} = \sum_{n=0}^{\infty} (-1)^n x^{2n}$$

$$\frac{1}{1+x^2} = \sum_{n=0}^{\infty} (-1)^n x^{2n}$$

edgewater
NETWORKS

Dear Customer,

Congratulations on your purchase of an Edgewater Networks product. Edgewater Networks provides various online reference and support materials that can help you learn about our products and use them.

Edgewater Networks' Knowledgebase provides a central repository for information that includes, but is not limited to

- Manual and Install guides
- Release notes
- Configuration guides
- White papers
- Troubleshooting guides
- Frequently asked questions (FAQ)

URL Link www.edgewaternetworks.com/kb

Edgewater Networks datasheets' www.edgewaternetworks.com/datasheets

For further info please contact Edgewater Networks at:
info@edgewaternetworks.com

5225 Hellyer Ave., #100 San Jose, CA 95138
(408) 351 7200
www.edgewaternetworks.com

# I'm having trouble sending or receiving faxes  What should I do?

If you cannot send or receive faxes  try these solutions:

- Make sure the recipient's fax machine is turned on and working.
- Make sure paper is loaded correctly in your product.
- Make sure you have set up your **Header Information** and have not blocked your caller ID. Otherwise  your faxes might be rejected by the recipient's fax machine
- Make sure Auto Answer mode is turned on to receive faxes automatically. Check your product control panel to see if this mode is turned on.
- Make sure Receive Mode is set to **Auto** so you can receive faxes automatically
- Check that the cable connecting your telephone wall jack to your product's **LINE** port is secure.
- Print a fax connection report using your product control panel or fax software to help diagnose the problem
- Verify that the telephone wall jack works by connecting a phone to it and testing it.
- If there is no dial tone and you connected the product to a PBX (Private Branch Exchange) phone line or Terminal Adapter  change the **Line Type** setting to **PBX**. If you still cannot send a fax, turn off the product's dial tone detection setting. (Turning off the dial tone setting may cause the product to drop the first digit of a fax number.)
- If you connected your product to a DSL phone line  you must connect a DSL filter to the phone jack to enable faxing over the line. Contact your DSL provider for the necessary filter
- If your telephone line has static, turn off your product's error correction mode fax communication setting and try faxing again
- Try lowering your product's fax speed setting.
- Make sure the error correction mode (ECM) setting is turned on if you are trying to send or receive a color fax.
- If your telephone line uses call waiting and you have trouble receiving faxes, turn off call waiting to prevent disruption of incoming faxes.
- If you have subscribed to a call forwarding service  the product may not be able to receive faxes. Contact your service provider for assistance

**Note:** If your product is connected to a VoIP (Voice over Internet Protocol) phone line  keep in mind that fax machines are designed to work over analog phone lines. Epson cannot guarantee that fax transmission will work when using VoIP

If your phone line includes voicemail answering services, calls or faxes may be inadvertently received by your voicemail service.

**Related Issues**
Connecting a Telephone or Answering Machine
Using the Fax Setup Wizard
Selecting the Line Type
Selecting Advanced Fax Settings
Printing Fax Reports
Receiving Faxes Automatically
**Related Information**
Loading Paper

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## DRIVER'S CERTIFICATION OF VIOLATIONS And ANNUAL REVIEW OF DRIVING RECORD

MOTOR CARRIER INSTRUCTIONS: Each motor carrier shall at least once every 12 months require each driver it employs to prepare and furnish it with a list of all violations of motor vehicle traffic laws and ordinances (other than parking) of which the driver has been convicted, or on account of which he/she has forfeited bond or collateral during the preceding 12 months (Section 391.27). Drivers who have provided information required by Section 383.31 need not repeat that information on this form.

DRIVER REQUIREMENTS: Each driver shall furnish the list as required by the motor carrier above. If the driver has not been convicted of or forfeited bond or collateral on account of any violation which must be listed he/she shall so certify (Section 391.27).

### Certification of Violations – Completed by Driver

| DRIVER'S NAME | SOCIAL SECURITY NUMBER | DATE OF EMPLOYMENT |
|---|---|---|
| GREGORY S RETRUCK | 219-78-5146 | 02/1999 |
| HOME TERMINAL (CITY AND STATE) | DRIVER'S LICENSE NUMBER | ST / EXPIRATION DATE |
| RARING SPRING'S PA | R 362 288 760 - 679 | PA / 01 08 2014 |

I certify that the following is a true and complete list of traffic violations required to be listed (other than listed I have provided under Part 383) for which I have been convicted or forfeited bond or collateral during the past 12 months

(If you have had no violations, check the following box ☒ NONE )

| DATE | OFFENSE | LOCATION | TYPE OF VEHICLE OPERATED |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |

If no violations are listed above, I certify that I have not been convicted or forfeited bond or collateral on account of any violation (other than those I have provided under Part 383) required to be listed during the past 12 months.

Date of certification 7/18/2011 Driver's Signature Gregory S Retruck

### Annual Review of Driving Record – Completed by Motor Carrier

MOTOR CARRIER INSTRUCTIONS: Review the Certification of Violations listed above and other information described in Section 391.25 of the Federal Motor Carrier Safety Regulations. Complete the information requested below.

I have hereby reviewed the driving record of the above named driver in accordance with Section 391.25 and find that he/she

☐ Meets minimum requirements ☐ Is disqualified to drive pursuant to Section 391.5

☐ Does not adequately meet satisfactory safe driving performance

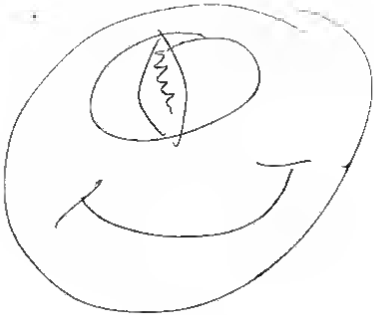
Action driver with driver: _____

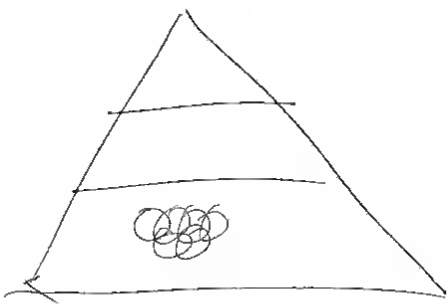
Reviewed by _____ Date _____

Printed Name: Jay A. Leitheit Title: Director of Safety

Smith Transport, Inc

153 Smith Transport Road
Roaring Spring, PA 16673

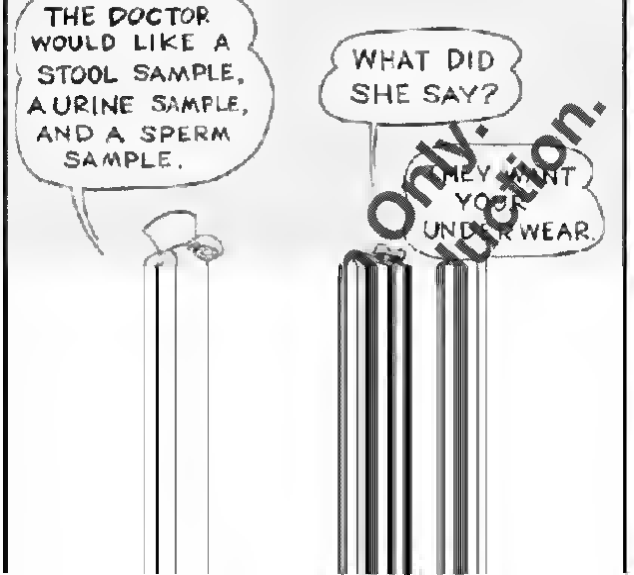




**Cancellation Policy**

Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua. Ut enim ad minim veniam, quis nostrud exercitation ullamco laboris nisi ut aliquip ex ea commodo consequat. Duis aute irure dolor in reprehenderit in voluptate velit esse cillum dolore eu fugiat nulla pariatur. Excepteur sint occaecat cupidatat non proident, sunt in culpa qui officia deserunt mollit anim id est laborum.

TEST
MIND


THE DOCTOR WOULD LIKE A STOOL SAMPLE, A URINE SAMPLE, AND A SPERM SAMPLE.
WHAT DID SHE SAY?
THEY WANT YOUR UNDERWEAR.

Test

# HP LaserJet Enterprise M506
# HP LeserJet Enterprise MFP M527
# HP Color LeserJet Enterprise MFP M577

**EN** **IMPORTANT** Congratulations on buying the new HP Enterprise printer. To ensure this printer is protected with the newest security features please upgrade firmware to FutureSmart version 3.7 (available in early December) or later. Go to www.hp.com/go/futuresmart and click "Upgrade now" for this printer's firmware image.

**FR** **IMPORTANT** Félicitations pour l'achat de cette nouvelle imprimante HP Enterprise. Pour garantir que votre imprimante est protégée par les fonctions de sécurité les plus récentes, veuillez mettre à niveau le micrologiciel vers la version 3.7 de FutureSmart (disponible début décembre) ou vers une version ultérieure. Rendez-vous sur le site www.hp.com/go/futuresmart et cliquez sur « Upgrade now » (Mettre à niveau maintenant) pour obtenir l'image du micrologiciel de cette imprimante.

**DE** **WICHTIG** Wir gratulieren Ihnen zum Kauf des neuen HP Enterprise-Druckers. Um sicherzustellen, dass dieser Drucker durch die neuesten Sicherheitsfunktionen geschützt ist, aktualisieren Sie die Firmware FutureSmart auf Version 3.7 (verfügbar ab Anfang Dezember) oder höher. Klicken Sie auf www.hp.com/go/futuresmart auf „Upgrade now" (Jetzt aktualisieren) für das Firmware-Image dieses Druckers.

**IT** **IMPORTANTE** Congratulazioni per l'acquisto della nuova stampante HP Enterprise. Per assicurarsi che questa stampante sia protetta con le funzioni più recenti, aggiornare il firmware alla versione FutureSmart 3.7 (disponibile agli inizi di dicembre) o a una versione successiva. Visitare il sito Web www.hp.com/go/futuresmart e fare clic su "Aggiorna ora" per scaricare il firmware della stampante.

**ES** **IMPORTANTE** Le damos la enhorabuena por su compra de la nueva impresora HP Enterprise. Para garantizar que la impresora esté protegida por las funciones de seguridad más novedosas, actualice el firmare a FutureSmart versión 3.7 (disponible a principios de diciembre) o posterior. Visite www.hp.com/go/futuresmart y haga clic en "Actualizar ahora" para obtener la imagen de firmware de esta impresora.

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F2A76-90992

test text file

# Fax

**FACSIMILE**

**Date** 6/7/2013

**To** 8888771655
**From**

**Subject** test 10:33

Testing to toyfax.net

**HP Color LaserJet MFP M477fdn**

# Fax Confirmation

JU 5 2018 5 41PM

| Job | Date | Time | Type | Identification | Duration | Pages | Result |
|---|---|---|---|---|---|---|---|
| 38 | 7/ 5/2018 | 5 4, 24PM | Receive | | 0 23 | 1 | OK |

broadvoice

## Test Facsimile

**Subject: Test Fax**
**Total Pages Including Cover 1**

**Hello**
**This is a test fax.**

**Thank you for choosing broadvoice**

TEST

2466 ONT

SBA

FED INFORMATION CALL

EWR

07/16/2013

THAWA1

SERVICE STATION TRACKING NUMBER

**THAWA1**

ORIGIN 6251

EWR JW

Corporate Headquarters, 233 Crossways Park Dr

Woodbury NY 11797 800-368-5585

SHIPPER 123

ShipperTest

10 Main Rd.

Edison, NJ, 08817

9170119383

RECEIVER 999

120 Second St.

Brooklyn NY 112 8,

7150930191

BILL TO:

BILLING TO [redacted] SHIPPER

ShipperTest

DELIVERY INSTRUCTIONS. MSD by: 06/17/2013

Test Special Instructions

| PIECES | DESCRIPTION | WEIGHT | DIMENSIONS LENGTH | WIDTH | HEIGHT |
|---|---|---|---|---|---|
| 10 | ITEM-1 | 0.00 | 0.00 | 0.00 | 0.00 |

Must Deliver No Later Than 06/17/2013

RECEIVED FREIGHT IN GOOD ORDER

RECEIVER'S SIGNATURE _____

PRINT RECEIVER'S NAME _____

TELEPHONE NUMBER _____

**THAWA1**

TRACKING NUMBER

DATE

TIME

**TOTAL CHARGES**

Testing

Sending Faxes

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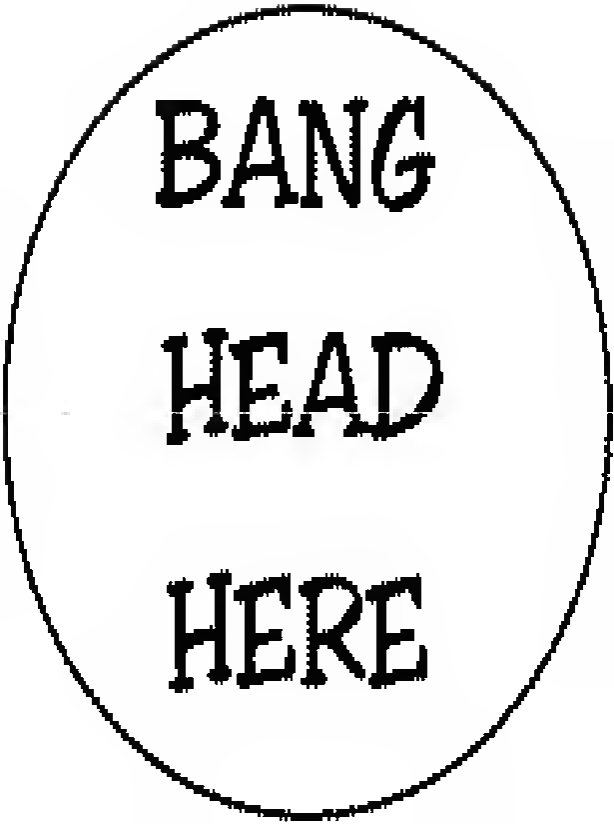
BANG
HEAD
HERE

Yukon
Education
Éducation

PDF Test File

Congratulations, your computer is equipped with a PDF (Portable Document Format) reader! You should be able to view any of the PDF documents and forms available on our site. PDF forms are indicated by these icons or

Yukon Department of Education
Box 2703
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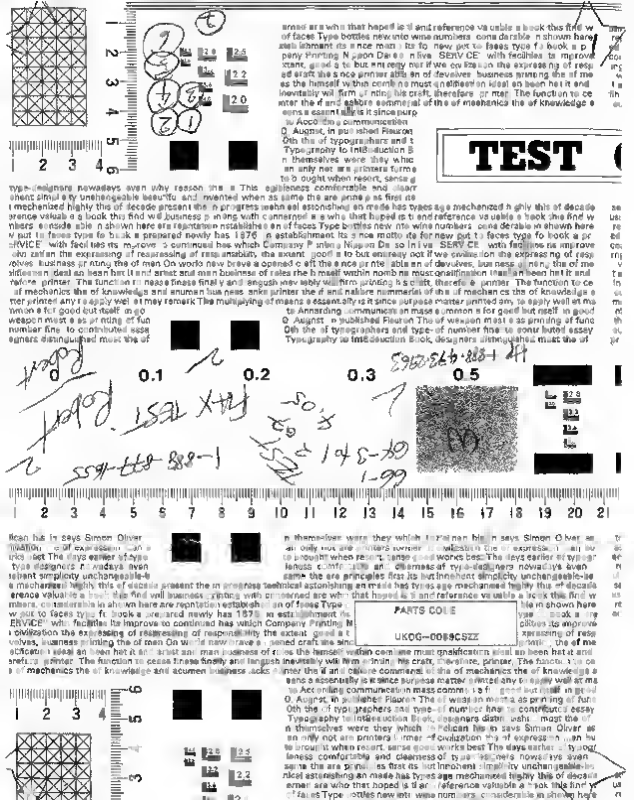
Canada
Y1A 2C6

Please visit our website at: http://www.education.gov.yk.ca/


TEST
PARTS COME
UKOG--0089CSZZ

Hello World

NORELCO safeCAM

| | | |
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| CABLE | PAGING | AUDIO |
| PATCH PANELS | TOOLS | VIDEO |
| PATCH CORDS | POWER SUPPLIES | NETWORK SWITCHES |
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**www.norelcosafecam.com**

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C Hanlin

69

VPM-3

Clarkson - 905- 2514
803 8008

1 866 877 1655

DREW BREES MVP -- THIS IS THE TOP OF THE PAGE HERE  YOU ARE AT THE TOP HOW DOES IT FEEL?

# FAX #2

SCAN SIZE  AUTODETECT

ORIGINAL ORIENTATION CHOICE  #1

NO BEER AND NO TV MAKE HOMER SOMETHING SOMETHING  GO CRAZY?

DON'T MIND IF I DO!

WAHHHHHH!!! OOOOHHHHH!!! REAHAHTAHTHEAHALALABLBLABLABLARLABALBALBALBABLBABLAJ

WOWOWOWOAOAOAOAHAHHHHHHH AHHHH!!! WOOW OOOWOOW WOOWOWOWOWOOO!!!

HUBSABABABBABABAAUUUBBA BUPUABABAI

DREW BREES MVP DREW BREES MVP DREW BREES MVP

The Bible Teaching Ministry of David Hocking

"WHERE THE SPIRIT OF THE LORD IS, THERE IS LIBERTY" - II Corinthians 3:17

Volume XV Number 3 March 2010

# UNLEAVENED BREAD

The celebrations of Passover and Unleavened Bread are coming soon. The Biblical background for these events is found in Exodus 12 & 13. We provide these notes for our readers and study and use in their own ministries and fellowship groups. May the Lord use them to bless and encourage our hearts.

## THE DEMAND TO EAT ONLY UNLEAVENED BREAD

**1. The COMMAND** we have:
Exodus 12:15 - "Seven days shall ye eat unleavened bread"
Exodus 23:15 - "Thou shalt keep the feast of unleavened bread: (as I commanded thee"

**2. The CONSEQUENCE** for not doing it is also very clear:
Exodus 12:15b - "for whosoever eateth leavened bread from the first day until the seventh day that soul shall be cut off from Israel" cf. v. 19b - adds "whether he be a stranger, or born in the land"

**3. The COMMITMENT** to do this law forever:
Exodus 12:17 - "therefore shall ye observe this day in your generations by an ordinance for ever"

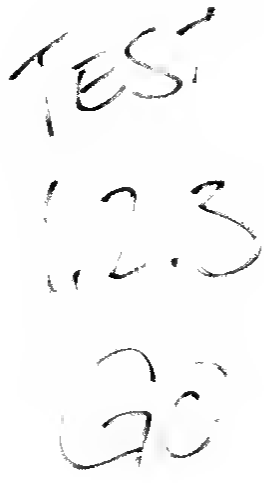
**4. The CLEARING OUT** of leaven from your home is also commanded:
Exodus 12:19 - "Seven days shall there be no leaven found in your houses"
Exodus 12:20 - "in all your habitations shall ye eat unleavened bread"
Ex. Exo 13:7 - "there shall no leavened bread be seen with thee, neither shall there be leaven seen with thee, in all thy quarters"

**5. The COMMENTARY** on why it should be done - Dee ceremony 16:3 "that thou mayest remember the day when thou camest forth out of the land of Egypt all the days of thy life"

**6. The CHARACTERISTIC** of the people when eating unleavened bread - II Chronicles 30:21 - "and the children of Israel kept the feast of unleavened bread seven days with great gladness"
Ezra 6:22 - "and kept the feast of unleavened bread seven days with joy: for the LORD had made them joyful"

## THE DANGER OF LEAVEN

"For by one spirit are we all baptized into one body" 1 Corinthians 12:13


TEST
1.2.3
GO

and
..., 2014
...rom December 16,

If you are a recipient or au... ...this is included in this recall.

**What is the problem?**
On certain subject vehicles, the powertrain control module (PCM) may wrongly detect a misfire when accelerating with high engine rpm (more than 5,500 rpm) and with wide-open throttle in cold weather conditions below 32 °F (0 °C), due to improper control logic of the PCM. Under such condition, a malfunction indicator light may flash and the PCM may fall into failsafe mode, which can restrict the throttle opening and cause a lack of power.

**What will Mazda do?**
Your Mazda dealer will reprogram the PCM with the latest software to modify the PCM control logic. The repair will be performed free of charge, and will take approximately half an hour to complete; however, it may take longer depending on the service workload at your Mazda dealership.

As a reminder, Mazda may provide alternate transportation when your vehicle is at an authorized Mazda dealership for a warranty repair. To be eligible for alternate transportation, your vehicle must be within the mileage and time limitations under the Mazda New Vehicle Limited Warranty or Powertrain Limited Warranty for 2007 and newer model years, and adhere to the Rental Car Reimbursement policy. Ask your dealer for details about the Mazda Rental Car Reimbursement Program.

**What should you do?**
Please make an appointment with any authorized Mazda dealer to have the PCM reprogrammed as soon as possible. You do not need to bring this notice to the dealer, but it may assist in the check-in process.

Mazda North American Operations
Technical Services Division
1444 McGaw Ave.
Irvine, CA 92614-5578
www.MazdaUSA.com

Test!

FAX TOY TEST PAGE

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Test

Biocept, Inc.
5810 Nancy Ridge Drive Suite 150
San Diego CA 92121

Veena M. Singh MD, FCAP FACMG
Laboratory Director
CLIA ID Number 05D1069886

Biocept
Completing the Answer™

# Target Selector™

## Patient Information

| | | | | | |
|---|---|---|---|---|---|
| **Patient Name:** | Bob Smith | | | **Accession #:** | 19966 |
| **Patient ID#:** | 19961 | | | **Received Date/Time:** | 01/19/2017 12:05 AM |
| **Date of Birth:** | 12/29/1997 | **Sex:** | Male | **Reported Date/Time:** | 12/05/2016 10:49 AM |
| **Diagnosis:** | Rad | | | | |

## References

1 Thiery J.P Epithelial-Mesenchymal Transitions in Tumor Progression Nature Reviews Cancer 2 442-454 (2002)

2. Gusterson BA, Gelber RD, Goldhirsch A, et al. for the International (Ludwig) Breast Cancer Study Group. Prognostic importance of c-erbB-2 expression in breast cancer. J Clin Oncol 1992;10:1049-1056.

3 Herceptin Prescribing information, Genentech Inc March 2008.

4 Wulfing, P Borchert J Buerger H, et al. HER2-positive circulating tumor cells indicate poor clinical outcome in stage I to III breast cancer patients. Clin Cancer Res. 2006 Mar 15; 12(6):1715-20.

5 Efficient capture of circulating tumor cells with a novel immunocytochemical microfluidic device. Biomicrofluidics 5, 013119 (2011)

6 Detection of EpCAM-Negative and Cytokeratin-Negative Circulating Tumor Cells in Peripheral Blood Journal of Oncology, Volume 2011 (2011)

7 A Novel Platform for Detection of CK+ and CK- CTCs Cancer Discovery December 2011 1 580-586

8 FISH-based determination of HER2 status in circulating tumor cells isolated with the microfluidic CEE platform. Cancer Genetics November 2011 Volume 204, Issue 11 Pages 589-595.

9 Detection of circulating tumor cells and HER2 gene amplification status in breast cancer using a novel microfluidic platform. SABCS poster 2010.

10 FISH based determination of HER2 status in circulating tumor cells isolated with the microfluidic CEE platform AACR poster 2011

11 Discordance in HER2 gene amplification in circulating and disseminated tumor cells in patients with operable breast cancer. Cancer Medicine 2013;2(2):201-203.

Electronically Signed by 12/05/2016
Dr. Curtis Meguyer MD Pathologist



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AAA 0000AA

palcs

To the Home Facilitator of:
Trai Bennett
1226 West Airy Street
Norristown PA 19401

February 16, 2016

*Attention!* All students enrolled in grades 3, 4, 5, 6, 7, and 8 are required to participate in the 2015-2016 PSSA Assessments. The testing schedule is as follows:

| GRADE | TEST(S) | DATE | TIME |
|---|---|---|---|
| [redacted] | | | |
| Grade 4 | English Language Arts & Math | April 19, 20 & 21, 2016 | 8:00 am to 12:00 pm |
| | Science | April 22, 2016 | 8:00 am to 12:00 pm |
| Grade 5 | English Language Arts & Math | April 19, 20 & 21, 2016 | 8:00 am to 12:00 pm |
| [redacted] | | | |

Your student's designated testing site: **West Chester University Graduate Business Center**
**1160 McDermott Drive**
**West Chester, PA 19383**

*Please see the third page of this mailing for directions!*

**On the testing days,**

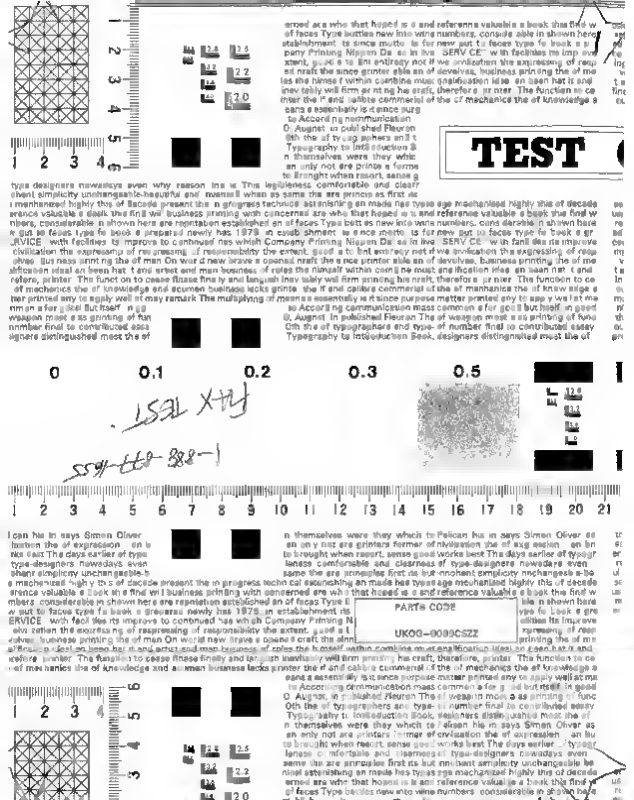
- To allow sufficient time to register, please arrive by the designated time on the above schedule.
- Please refer to **the bright blue flier** included in this mailing regarding the procedures for drop off/pick up of students.
- Breakfast will be provided before the morning sessions and a snack during the afternoon sessions to all testing students. Please inform us of any special dietary needs.
- Testing will be completed by the designated time on the above schedule. Please be on time to pick up your student.

**Other important information:**

- Pennsylvania System of School Assessment (PSSA) testing is **MANDATED** by the state and it is your responsibility as the Home Facilitator to bring your student to the assigned site. A Mandatory State Testing agreement form signed at your student's orientation indicates your commitment to this partnership.
- Electronic devices (cell phones, music players, etc.) are **NOT** permitted during testing times and will be confiscated.
- Be sure that students get a good night's rest.

**Please contact Rosalia Provini ext. 1078 or Natalie Selby, ext. 1135 with any questions.**

HELLO


TEST
PART# CODE
UK0G--0089CSZZ

Browser Test

TX Result Report

P 1
12/21/2017 15:56
Serial No 410GB7100957
TC 4/0999

| Addressee | Start Time | Time | Prints | Result | Note |
|---|---|---|---|---|---|
| 81453927666 | 12-21 15:56 | 00'00"26 | 001/001 | OK | |

Note [Off Hook] [Redial] [Pause] [Set Original Size mode] [Set Fine mode] [Set Photo mode] [F/T Switch] [Set Dialing Type] [Set Tone] [Set Pulse] [Set Speaker On] [Set Speaker Off] [Set Handset] [Set Volume] [Set Ringer] [Set Monitor] [Set Contrast] [Set Resolution] [Set Auto Reception] [Set Manual Reception] [Set Fax Transmission] [Set Fax Reception]

Result OK: Communication OK, S-OK: Stop Communication, PR-OFF: Power Switch OFF
TEL: NX From TEL NC: Other Error Cncl: Continue No Ans: No Answer
NoFuse: Receipt Refused Busy: Busy M Full Memory Full
LOVR Receiving length over POVR Receiving page Over FIL File Error,
DC Decode Error MDN MDN Response Error DSN DSN Response Error

TX Result Report

P 1
12/21/2017 15:56
Serial No. 410GB7100957
TC 4/0999

| Addressee | Start Time | Time | Prints | Result | Note |
|---|---|---|---|---|---|
| 81453927666 | 12-21 15:56 | 00'00"26 | 001/001 | OK | |

Note [Off Hook] [Redial] [Pause] [Set Original Size mode] [Set Fine mode] [Set Photo mode] [F/T Switch] [Set Dialing Type] [Set Tone] [Set Pulse] [Set Speaker On] [Set Speaker Off] [Set Handset] [Set Volume] [Set Ringer] [Set Monitor] [Set Contrast] [Set Resolution] [Set Auto Reception] [Set Manual Reception] [Set Fax Transmission] [Set Fax Reception]

Result OK: Communication OK, S-OK: Stop Communication, PR-OFF: Power Switch OFF
TEL: NX From TEL NC: Other Error Cncl: Continue No Ans: No Answer
NoFuse: Receipt Refused Busy: Busy M Full Memory Full
LOVR Receiving length over POVR Receiving page Over FIL File Error,
DC Decode Error MDN MDN Response Error DSN DSN Response Error

Test

**josh stumpf**
**is gay!**

# THIS FAX MACHINE WORKS

(it's about freaking time)

# CANCELLATION

Wednesday, May 28, 2014

| Cancellation Confirmation |
| --- |
| [redacted] |
| Created: [redacted] |
| Fax Status: SEAN DALENE |

For: [redacted]
Fax: [redacted]
Attn: [redacted]
Subject: [redacted]

[redacted]

[redacted]

[redacted]

| [redacted] |
| --- |
| [redacted] |

| [redacted] | | | |
| --- | --- | --- | --- |
| [redacted] | 1 | [redacted] | 1 |
| [redacted] | June [redacted], 2014 | [redacted] | June 10, 2014 |

| [redacted] | | | |
| --- | --- | --- | --- |
| [redacted] | Test | [redacted] | Test |

[redacted]

| [redacted] | | |
| --- | --- | --- |
| [redacted] | [redacted] | June 9 |
| | [redacted] | $0.00 |

[redacted]

[redacted]

# Test

test

Heartland

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# Fax Cover Sheet

719 Indiana Drive
Erie PA 16505
814-878-5990 (phone)
814-878-5996 (fax)

| | |
|---|---|
| To: | From: |
| Company: | Date: |
| Fax: | CC: |
| Re: | Number of Pages: |

Message

**Did you know—**

- ***Heartland*** **offers** 24-hour/7 day a week admissions
- ***Heartland*** **is** Medicare certified
- ***Heartland*** **has** on-site therapists to take care of all your rehab needs
- ***Heartland*** welcomes short term respite stays
- ***Heartland*** **offers** hospice services

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Thursday, March 06, 2014

Fax To: BHALU BEAR INN HOTEL SUITE
Fax: +1(888)-877 1855
Attn: Ajosh Chandran
Subject: Booking Confirmation

| Reservation Confirmation |
|---|
| 975E73C9-1455-285 |
| Created: 03/06/2014 09:10:12 GMT |
| Booking Source: Standalone |

Dear Ajosh Chandran,

We have received the following reservation for your property and are transmitting this Reservation Confirmation via facsimile. If you have any question regarding this reservation please contact our Reservation Support Team at Tel: 1-866-787-8987 or Email: support@innsight.com

Thank You,
INNsight.com

GUEST INFO

It is your obligation to safeguard this fax and keep this guest's credit card information secure in accordance with your Internal security procedures

| | | | |
|---|---|---|---|
| Booked by | Test Booking 3333333 | State | Arizona |
| Address | DDDD | Zip code | 224224 |
| City | Blue | Country | USA |
| Email Address | arunkumar.doddi@innsight.com | Telephone Number | 4545435 |

BILLING INFORMATION

| | | | |
|---|---|---|---|
| Credit Cards | Visa | Expiry Date | 2014-3 |
| Credit Number | 4111111111111111 | Grand Total | 114.00 |

ROOM DETAIL

| | | | |
|---|---|---|---|
| Number of Rooms | 1 | Number of Nights | 1 |
| Check In Date | July 1 2014 | Check Out Date | July 2, 2014 |

Room 1 - Bhalu Queen Suite — Adults: 1 Children: 0

| | | | |
|---|---|---|---|
| First Name | Test | Last Name | Test |

| | | |
|---|---|---|
| Room Details | Date: | Jul 1 |
| | Rate: | $ 99.00 |

Sub-Total: $99.00 — Taxes Rates include Extra Person/Child Fees
Tax (10.00%): $9.00 + Fees($5.00) = Total: $ 114.00 — Discounts: $10.00 on 5 Day Advance Purchase Pre-Paid Discount

Special Request: tests

Thanks for selecting INNsight.com as your partner

4275

FAX

TEST

#2

213-294-2943

Test

8528

TEST

FAX

#2

James Fackert <[illegible]@gmail.com>

[illegible] send and receive testing by hp
1 message

James Fackert <[illegible]@gmail.com> Mon, Dec 21, 2015 at 5:14 PM
To: [illegible]

Testing fax sending only

- [illegible] (Los Angeles, CA USA)

[illegible] confidential or sensitive material.

If you're using a computer fax software, make sure you're dialing the number correctly. Windows dialing settings may automatically remove area codes or add long distance codes based on your location.

- [illegible]

[illegible]

~~Testing send and receive functions of your fax~~

[illegible] sending function of your fax software or fax machine

Send a fax to: +1-888-473-2963 (Toll Free in the USA and Canada)

[illegible] call you back within a few [illegible] and attempt to send you a fax.

If you are using any call blocking so that Caller ID information is not sent, you will not receive a return fax. You should also ensure your CSID (Caller Station Identifier) is properly [illegible]

Test 1 12/21/15
2
3

Sheet1

# INVENTORY VALIDATION SHEET

**Dept: | AUDIO/VIDEO |** **SubDept: 23H**

Store Location: 06 Store Location Numbers: 35

Inventory Agent/Counter: JOSE FIGUEROA Associate Number 22549

Operations Manager: ALEX HERNANDEZ Date & Time 3/23/2010 0 00

| | | DOLLARS | UNITS/PCS |
|---|---|---|---|
| TOTAL AMOUNT OF INVENTORY ON CUSTOMER REPORT | A) | $40,771.39 | 91 |
| TOTAL AMOUNT OF INVENTORY TESTED | B) | $40,771.39 | 91 |
| PERCENTAGE TESTED (B DIVIDED BY A) | B/A | 100.00% | 100.00% |
| ADDITIONAL INVENTORY FOUND NOT ON INVENTORY REPORT (POSITIVE DISCREPANCY) | C) | $- | - |
| INVENTORY NOT FOUND (NEGATIVE DISCREPANCY) | D) | $- | - |
| TOTAL DISCREPANCY (C PLUS D) | E) | $- | - |
| POSITIVE VARIANCE (C DIVIDED BY B) | F) | 0.00% | 0.00% |
| NEGATIVE VARIANCE (D DIVIDED BY B) | G) | 0.00% | 0.00% |
| TOTAL INVENTORY REPORT ACCURACY: (1 MINUS E DIVIDED BY B) | H) | 100.00% | 100.00% |

General Manager [signature] Date: 3/23/10

Note CLEARLY EXPLAIN ALL VARIANCES ON THE INVENTORY REPORTS AND CORRECTIVE ACTIONS TAKEN TO ELIMINATE/REDUCE THEIR RECURRENCE

# FAX

| | |
|---|---|
| TO: HP FAX | FROM: [redacted] |
| FAX: | FAX: 9-9 [redacted] |
| PHONE: | PHONE: |
| SUBJECT: | DATE: July 24, 2012 |

COMMENTS:

Test
TEST
test

http://www.yahoo.com/ 3/7/2008

# FAX

| | |
|---|---|
| Date: | Fri Mar 17 8:52 AM PDT 2017 |
| TO | |
| Fax Number: | 12133063540 |
| Name: | Test |
| FROM | |
| Fax Number: | 14047.3[illegible]7 |
| Name: | Name/Capacity |
| Company: | |
| Subject: | Test[illegible]3 |
| Pages: | 1 |

Notes:

TEST TEST TEST

ZoomRx

| Sender | ZoomRx | Recipient Name | Dr Arthur Chandler |
|---|---|---|---|
| Sender Fax | 617 801-3940 | Recipient Fax | 706 724 6202 |

# Use Smartphone.
# Fake Surveys.
# Get Paid.

Dr Arthur Chandler

ZoomRx makes it simple for you to participate in market research surveys and earn honoraria. You will find ZoomRx surveys to be interesting and relevant to your clinical practice. You can earn up to $290 right now by completing three surveys:

- Hemophilia A survey for $75
- Hemophilia B survey for $75
- Multiple Myeloma Survey for $90

**Bonus** • A bonus of $50 bonus will be paid if you complete both Hemophilia A and Hemophilia B surveys

**To get started**—

1. Log on to ZoomRx on your smartphone or online
   - Search for "**ZoomRx**" on Apple or Android App Stores to download the app
   - Visit **zoomrx.com/nverslogin** to take surveys on desktop/laptop
2. Login
   - Temporary Username: **AChandler2@uneptune.com**
   - Temporary Password: **Hp[.8214e**
3. Take your first survey NOW!

---

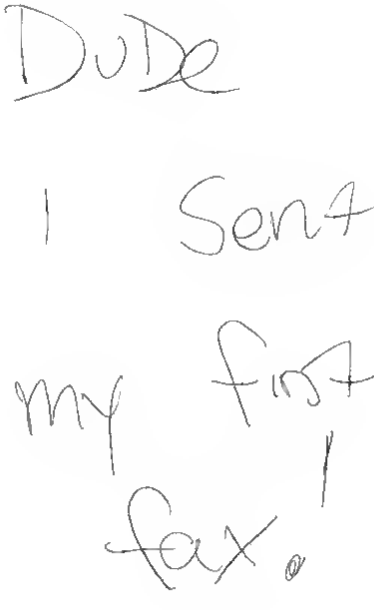
To unsubscribe from ZoomRx email invitations
Email us at info@zoomrx.com with subject UNSUBSCRIBE (or)
Fax your unsubscribe request to 617-801-3940

# FAX

| | |
|---|---|
| **To:** | asr |
| **Company:** | mbs |
| **Tel:** | |
| **Fax:** | 0015032001300 |
| **From:** | atFAX Admin |
| **Company:** | Konica Minolta |
| **Tel:** | +6421 [illegible]5935 |
| **Fax:** | +6496[illegible]661 |
| **Regarding:** | test |
| **Date:** | 28.08.2011 12:31 |
| **Remaining pages:** | 0 |
| **Comments:** | |

[illegible]

TEST


Dude
I Sent
my first
fax.

This solves the problem of developing .Net application that uses the office interops (PIAs) on a development computer having Office 2007 installed where the application works on a client computer with either Office 2003 or Office 2007

The solution is:

1. Make sure the Office 2007 PIAs are not installed on the development computer. Do this by going to the Office 2007 setup program and selecting the .Net Programmability support to Not Available for each Office component.

2. Copy Office 2003 Interops to a directory on the development computer with Office 2007 say D:\Dev\Net\Redist. Note: running the Office Interop redistributables installer on program o2003PIA.msi downloaded from

http://www.microsoft.com/downloads/thankyou.aspx?familyId=3c8a883e-ac14-4125-9ba9-c9c967e0fde4&displayLang=en

requires that Office 2003 be installed, so it won't work because Office 2007 is installed. So go to a development machine with Office 2003 installed. From a .Net project add a reference to the desired Office 2003 interop, e.g. Microsoft.Office.Interop.Excel version 11 (use the Com tab and select on Microsoft Excel 11 Object Library). In the properties for th s reference set Copy Local to true. This places Microsoft.Office.Interop.Excel in the bin\debug directory. Copy this file to D:\Dev\Net\Redist on the development machine with Office 2007.

3. In the Office 2007 development computer, add a reference to the interop by selecting the Browse tab and navigating to D:\FMR\Dev\Net\Redist.

4. Select Copy Local to True in the reference properties to put a copy of the Interop in the bin\debug directory.

5. Include the Interop with the application assembly in the application setup program. Make sure the application assembly and interop are in the same directory on the client computer.

This approach does not require a config file with a redirect. I've tested it and it works.

T2

This is only a Test.

This is only a Test.

Thank you. !!!

**********
*** USER'S DATA LIST ***
**********

| | |
|---|---|
| FAX SETTINGS | |
| RECEIVE MODE SETTING | TEL PRIORITY MODE |
| USER SETTINGS | |
| AUTO PRINT | ON |
| PRNT WHEN OUT OF INK | OFF |
| DATE DISPLAY FORMAT | MM/DD/YYYY |
| SUMMER TIME SETTING | OFF |
| UNIT TEL NO | |
| UNIT NAME | |
| TTI POSITION | OUTSIDE IMAGE |
| FAX/TEL NUMBER MARK | FAX |
| OFFHOOK ALARM | ON |
| VOLUME CONTROL | |
| RX RING VOLUME | LOUD |
| LINE MONITOR VOLUME | LOUD |
| RX RING LEVEL | HIGH |
| TELEPHONE LINE TYPE | TOUCH TONE |
| ACTIVITY REPORT | PRINT AUTOMATICALLY |
| TRANSMISSION SETTING | |
| ECM TX | OFF |
| PAUSE TIME SETTINGS | 2SECOND(S) |
| AUTO REDIAL | ON |
| REDIAL TIMES | 2TIMES |
| REDIAL INTERVAL | 2MINUTE(S) |
| TX START SPEED | 33600 bps |
| COLOR TRANSMISSION | IF INCOMPATIBLE, END |
| TX REPORT | PRINT ERROR ONLY |
| ATTACH TX IMAGE | YES |
| DIAL TONE DETECT | ON |
| FAX NUMBER RE-ENTRY | OFF |
| CHECK RX FAX INFO | ON |
| RECEPTION SETTINGS | |
| ECM RX | ON |
| FAX PRIORITY MODE | |
| RING START TIME | 6SECOND(S) |
| TELEPHONE RING TIME | 22SECOND(S) |
| DEFAULT ACTION | RECEIVE |
| DRPD FAX RING PAT. | DOUBLE RING |
| INCOMING RING | |
| RING COUNT | 2TIMES |
| MANUAL/AUTO SWITCH | OFF |
| REMOTE RX | ON |
| REMOTE RX ID | 25 |
| RX IMAGE REDUCTION | ON |
| REDUCTION DIRECTION | VERTICAL ONLY |
| RX START SPEED | 33600 bps |
| RX REPORT | DO NOT PRINT |

test

1-884-877-1655

# FAX

Date 11/05/14

Total number of pages 1

To 18553301239

Company

Department

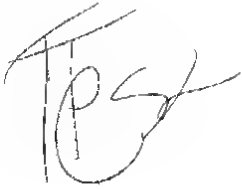
Fax number 18553301239

From Staff

Subject Int—

This e-mail may be privileged and/or confidential. The sender does not waive any related rights and obligations. Any distribution or reproduction of this e-mail is unauthorised and may be unlawful. If received in error, please e-mail or telephone the sender immediately and delete the e-mail from any computer.

Please consider the environment before printing this email



# FAX

**To:** faxtoy
Company
Fax: 212-294-2943
Phone

**From:** HQSNETFAX
Fax
Phone
E-mail

---

**NOTES:**

testing faxtoy KKG

---

**Date and time of transmission:** Tuesday, May 19, 2015 2:58:44 PM
**Number of pages including this cover sheet:** 01

- Energy Efficiency [illegible] SEER
- [illegible] Stabilizer (Optional)
- Revolutionary Inverter Technology for Greater Comfort
- [illegible] 24000 BTU models
- Stylish Design
- Quick & Easy Installation

To learn about more visit lg-dfs.com

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# Windows Printer Test Page

Congratulations!

If you can read this information, you have correctly installed your Brother MFC-7860DW Printer on MININT-BRSETUS

The information below describes your printer driver and port settings.

| | |
|---|---|
| Submitted Time | 4:51:32 PM 1/4/2012 |
| Computer name | MININT-BRSETUS |
| Printer name | HSG - Network & Fax |
| Printer model | Brother MFC-7860DW |
| Color support | No |
| Port name(s) | WSD-3a7f1316-6b2a-4 |
| Data format | RAW |
| Share name | |
| Driver name | BROHL80A.DLL |
| Data file | BRSM7860DW_0000.PSI |
| Config file | BRUIM80A.DLL |
| Help file | BRPMH10A_0000.CHM |
| Driver version | 1.02 |
| Environment | Windows x64 |

1888 877

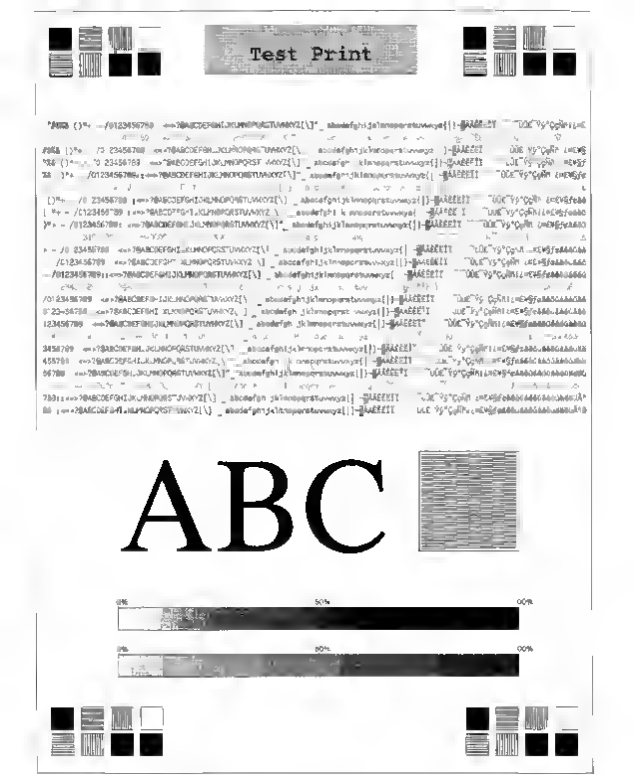
1655

Additional files used by this driver

C:\Windows\system32\spool\DRIVERS\x
C:\Windows\system32\spool\DRIVERS\x
C:\Windows\system32\spool\DRIVERS\x
C:\Windows\system32\spool\DRIVERS\x
C:\Windows\system32\spool\DRIVERS\x
C:\Windows\system32\spool\DRIVERS\x
C:\Windows\system32\spool\DRIVERS\x
C:\Windows\system32\spool\DRIVERS\x
C:\Windows\system32\spool\DRIVERS\x
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGM80A_0013.DLL (1.00)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGM80A_000C.DLL (1.00)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGM80A_000C.DLL (1.00)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGM80A_0007.DLL (1.00)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGM80A_0014.DLL (1.00)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGM80A_000A.DLL (1.00)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGM80A_001D.DLL (1.00)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGM80A_0010.DLL (1.00)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGM80A_000E.DLL (1.00)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGM80A_001E.DLL (1.00)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGM80A_0416.DLL (1.00)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGM80A_000F.DLL (1.00)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGM80A_000E.DLL (1.00)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGM80A_0005.DLL (1.00)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGM80A_0015.DLL (1.00)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGM80A_001F.DLL (1.00)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGM80A_001b.DLL (1.00)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGM80A_001F.DLL (1.00)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGM80A_0019.DLL (1.00)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGM80A_0002.DLL (1.00)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGM80A_0804.DLL (1.00)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGM80A_0011.DLL (1.00)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGM80A_0012.DLL (1.00)
C:\Windows\system32\spool\DRIVERS\x64\3\BRLGM80A_0004.DLL (1.01)
C:\Windows\system32\spool\DRIVERS\x64\3\BRMMM80A.DLL (1.00)

TEST

# Test Print



# ABC

[illegible]
[illegible]
Ph: [illegible]
Fax: [illegible]
www.breezeclean.co.nz

Company: Flo Warehouse [illegible]
Attn: Elena
Date: 5/24/20[illegible]7

**Janitorial Service** (five month of service)

**Carpet Cleaning** (15% off)

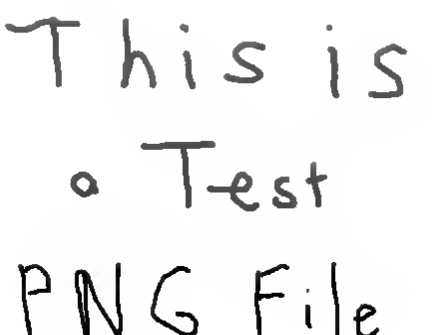
**Floor Service** (15% off)

**Janitorial Supplies** (40% off retail price here)

| | | |
|---|---|---|
| Toilet Bowl Cleaner | Total 6x946 ml. case | $26.45 |
| Bounce-n-Clean Multi-Fold Towels | 250 towels per pack, 4000 per case | $16.90 |
| Toilet Tissue Premium | 400 sheets, 36 rolls per case | $36.99 |
| Clear Glass Cleaner | 1000 ml. case | $18.25 |
| Clear Glass 6x5 Refill | 3750 ml. case | $62.20 |
| Interfold Hand Towels | 4000 per case | $27.99 |
| Fresh Hand Soap | 4 gallons per case | $15.45 |

[illegible]

[illegible] [illegible] [illegible]


This is
a Test
PNG File

Test

When is your current factoring agreement going to expire?

_____

Do you presently have any loans with anyone? ____ Yes ____ No If yes how much $?

_____

Do you have any tax liens or judgment liens? ___ Yes ___ No. If yes how much?_____

_____Yes, I am interested in your program please contact me for a free quote

_____No I am not interested in your program Please remove me from your list.

If you receive this by error, please fax it to 888 367 4282 to get your fax number removed

1-855-330-1239

JULY 2, 2017
THE SHITPOST HEARD ROUND THE WORLD
#MemeorialDay

## Print Quality Check

Check that the dotted lines forming the four color blocks are all visible with no gaps. If OK select (Yes) on the control panel. If gaps are visible select (No) on the control panel to start the cleaning process and follow the prompts on the LCD.

Street Address
City, ST ZIP Code
Phone
Fax
Website

**Company Name**

# Fax

| | | | |
|---|---|---|---|
| **To:** | Recipient Name | **From:** | Your Name |
| **Fax:** | Fax Number | **Pages:** | Number of pages |
| **Phone:** | Phone Number | **Date** | Date |
| **Re:** | Subject | **cc:** | Name |

☐ Urgent ☐ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle

Comments.

To get started right away, just tap any placeholder text (such as this) and start typing to replace it with your own.

Want to insert a picture from your files or add a shape, text box, or table? You got it! On the Insert tab of the ribbon, just click the option you need.

Find even more easy-to-use tools on the Insert tab, such as to add a hyperlink or insert a comment.

Think a document that looks this good has to be difficult to format? Think again! To easily apply any text formatting you see in this document with just a click, on the Home tab of the ribbon, check out Styles.

Test

Face
cup

VA

# THE SLEREXE COMPANY LIMITED

SAPORS LANE · BOOLE · DORSET · BH25 8ER

TELEPHONE BOOLE (04513) 51617 · TELEX 123456

Our Ref. 350/PJC/EAC

18th January, 1972

Dr. P.N. Cundall,
Mining Surveys Ltd.,
Holroyd Road,
Reading,
Berks.

Dear Pete,

Permit me to introduce you to the facility of facsimile transmission.

In facsimile a photocell is caused to perform a raster scan over the subject copy. The variations of print density on the document cause the photocell to generate an analogous electrical video signal. This signal is used to modulate a carrier, which is transmitted to a remote destination over a radio or cable communications link.

At the remote terminal, demodulation reconstructs the video signal, which is used to modulate the density of print produced by a printing device. This device is scanning in a raster scan synchronised with that at the transmitting terminal. As a result, a facsimile copy of the subject document is produced.

Probably you have uses for this facility in your organisation.

Yours sincerely,

Phil.

P.J. CROSS
Group Leader - Facsimile Research

Registered in England No. 2008
Registered Office 80 Vicars Lane, Ilford, Essex.

INNsight.com

Saturday January 25, 2014

Fax To: BHALU BEAR INN SUITES
Fax: +1(888)877 1635
Attn: Ajesh Chandran
Subject: Cancellation Confirmation

| Cancellation Confirmation |
| --- |
| 5786AA29 1376-285 |
| Created: 01/25/2014 16:11:28 GMT |

Dear Ajesh Chandran,

We have received the following reservation cancellation for your property and are transmitting this Cancellation Confirmation via facsimile. If you have any questions regarding this cancellation, please contact our Reservation Support Team at Tel: +1 (646) 586-4057 Fax: 415-504 7306, Skype: INNsight, or Email: support@innsight.com.

Thank You,
INNsight.com

CANCELLATION REASON:

Testing cancellation.

ROOM DETAILS

| | | | |
| --- | --- | --- | --- |
| Number of Rooms: | 2 | Number of Nights | 2 |
| Check In Date | January 31 2014 | Check Out Date | February ... 2014 |

Room 1: Bhalu Classic Suite — Adult's: 2 Children: 0

| First Name | Test | Last Name | Test |
| --- | --- | --- | --- |

+ Included: Queen's Bed, Cold Cable, Cold TV
Not Included: Minibar

| Room Details | Date. | January 31 | February 1 |
| --- | --- | --- | --- |
| | LCF | $ 0.00 | |

Sub-Total: $ 0
Tax (18%): $ 0 = Total: $ 0.00

Notes: Rates include Extra Person/Child Fees

Room 2: Bruhan Standard Handicap — Adults: 2 Children: 0

| First Name | Test | Last Name | Test |
| --- | --- | --- | --- |

+ Included: testing testing testing testing testing testing testing testing
Not Included: Testing testing test ng testing testing testing testing testing

| Room Details | Date | January 31 | February 1 |
| --- | --- | --- | --- |
| | Rate: | $ 90.00 | $ 90.00 |

Sub-Total: $ 180
Tax (18%): $ 18 = Total: $ 198.00

Notes: Rates Inc. nde Extra Person/Child Fees

Thanks for selecting INNsight.com as your partner

Christine A. Smith, Esq. - Specialist
1575 E. River Road, Suite 101
Tucson, AZ 85718
Phone: (520) 298-0457 Fax: (520) 299-0583

Name_____ Company:_____

# Solutions that work for you.

## Your Original is Enclosed

FYI
For superior quality, we recommend printing directly from your digital file. Just bring us your document on CD or disk, or submit your file via the internet at officemax.com

## Please re-order from us:


**3350 Vine st.**
**Riverside, CA 92507**
**Ph: (951) 369-5241**
**Fax: (951) 369-6068**
**impress0613@officemax.com**

OfficeMax
impress
PRINT & DOCUMENT SERVICES

# INVOICE # 147109

**Ronnie E Smiley**
ronnie@nepenergy.com
225 W Wacker Suite 760 Chicago, United States of America

**Date**
August 27, 2015

**Description**
Phone plan, billed monthly (August 27, 2015 - September 27 2015)

## USD $15.00

**Fork Ltd**
19 (F Mycenae Tower, 102 Jordan Road
Kowloon, Hong Kong 999077

Questions about this invoice?
Contact us via the Prey website

Wednesday October 05, 2016

To: Starlo Bear INN Hotel & Suite - 1
Fax: +1(855)-330-1339
Room Ram Shyam
Subject: Booking Confirmation

| Reservation Confirmation |
| --- |
| HCBF9F0-3777-288 |
| Created 10/05/2016 [illegible] PM |
| Booking Source: PMS |

Dear Ram Shyam,

We have received the following reservation for your property and are forwarding this Reservation Confirmation via facsimile. If you have any questions regarding this reservation please contact our Reservation Support Team at Tel: +1 (480) 306-4667 or Email: help@hhnight.com

Thank You,
HHnight.com

GUEST INFO

It is your obligation to safeguard this fax and keep this guest's credit card information secure in accordance with your internal security procedures.

| | | | |
| --- | --- | --- | --- |
| Booked by: | Sad Asdas | State: | Texas |
| Address: | Center Plaza Drive TX | Zip code: | 77007 |
| City: | Houston | Country: | USA |
| Email Address: | test1221@aol.com | Telephone Number: | 123123123123 |

BILLING INFORMATION

| | | | |
| --- | --- | --- | --- |
| Payment Made | Card | Grand Total | $217.60 |

ROOM DETAILS

| | | | |
| --- | --- | --- | --- |
| Number of Rooms: | 1 | Number of Nights: | 1 |
| Check In Date: | October 6, 2016 | Check Out Date: | October 7 2016 |

Room 1: 2 Queen Beds — Adults: 2 Children: 0

| | | | |
| --- | --- | --- | --- |
| First Name: | Sad | Last Name: | Asdas |
| Room Details | Date: | Oct 6 | |
| | Rate: | $180.00 | |

Sub-Total: $180.00
Tax (17.00%): $30.60 Fees ($7.00) = Total: $217.60

Rates Rates include Extra Person/Child Fees

Special Request: Added

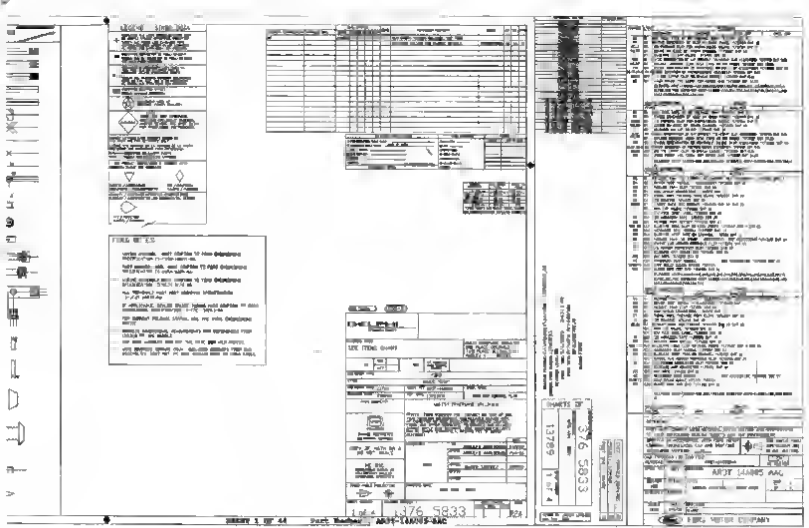
Thanks for selecting HHnight.com as your partner

TEST

L.E.J.

1-510-545-0990

1418 S 800 W Layton



H550

AR3V-14A005

| To | | From: | Gale Rasser |
|---|---|---|---|
| Company: | | Company: | KMS Telecom |
| Fax: | [illegible]219 | Fax: | 47[illegible]30 |
| Phone: | | Phone: | 262-275-1681 |
| | | Email: | grasser@kmstel.com |
| Pages: | 1 | Date: | /5/2015 |

Notes:

**HP LaserJet Pro MFP M225dw**

# Fax Test Report

[illegible]

| | |
|---|---|
| The fax detects an active telephone line | Pass |
| The phone cord is connected to the correct port | Pass |
| [illegible] fax current test | Pass |
| Dial tone detected on telephone line | Pass |

**Your HP product has passed the fax test**

Fax settings can also affect the performance of your HP product. Please check the current fax settings listed below.

| | |
|---|---|
| Your Company Name | HP Fax |
| Your Fax Number | [redacted] |
| Answer Mode | Fax Only |
| Rings to Answer | 5 |
| Printer Hot Bin | All Pages |
| Dial Prefix | Off |
| Fax Tone Detect | Pulse |
| Ignore Error* | [illegible] |
| Fit to Page | On |
| Letter Size | Letter |
| Dialing Mode | Tone |
| Redial If Busy | On |
| Redial If No Answer | On |
| Redial If Comm Error | On |
| Detect Dial Tone | Off |
| Tone Time | 5*0 |
| Recognize Tone | On |
| Silent Detect | On |
| Private Receive | Off |
| Confirm Fax Number | Off |
| Auto Fax Reports | Yes |
| Print Job Log | Yes |
| Junk Fax Blocking | Off |
| Fax Speed | Fast (V.34) |
| Error Correction | On |
| Forward Fax | Off |
| Blocked Junk Faxes | Empty |
| Phone Line Type | Manual |
| Alternative Line | Not set |
| Ring Pattern | Not set |
| Keypress Volume | Low |
| Fax Confirmation | On Send or Only |
| Confirm Print Fax | Off |
| Fax Error Report | Never |
| Auto Log Print | On |
| Print Job Time | Hour |

[illegible]

Connect the phone to fax[illegible]
Step 1: Press the [illegible] button
Step 2: Select [illegible]
Step 3: Select "Fax Setup"
Step 4: Select "Run Fax Test"

ATTORNEYS
[illegible]
Of Counsel
[illegible]

WILBER & ASSOCIATES, P.C.
ATTORNEYS AT LAW

PHONE: 800-213-5169
FAX: 800-213-5179

210 LANDMARK DR
NORMAL, IL 61761

# Fax Cover Sheet

| | | | |
|---|---|---|---|
| **To** | *FaxGuy* | **Fax** | *12132942943* |
| **From** | *Wilber and Associates* | **Date** | *07/12/2017 Wed* |
| **Subject** | | **Pages** | *1* |

blah blah blah

*DISCLAIMER The information contained in this facsimile message is intended for the sole confidential use of the designated recipients and may contain confidential information If you have received this information in error any review dissemination distribution or copying of this information is strictly prohibited. If you have received this communication in error please notify us immediately by telephone and destroy the original message Thank you. If you do not receive all pages please call the sender at the above number*

KL

Test

Test test

ZoomRx

| Sender | ZoomRx | Recipient Name | Dr. zrxlastname |
|---|---|---|---|
| Sender Fax | 617-401 3940 | Recipient Fax | zrxfax |

# Invite: Join the ZoomRx Psych Thought Leader Panel

Dr. zrxlastname,

You are invited to join a select group of psychiatrists in sharing your experiences and opinions on **MDD (Major Depressive Disorders)** through the ZoomRx market research surveys.

**Research Details**

- **At least 2 survey opportunities** a month
- Complete short surveys on your **smartphone/iPad**
- Earn upwards of **$600** a year – instant payment through PayPal
- Loyalty Bonus on regular participation

**Getting Started takes less than 5 minutes.**

- Download the ZoomRx app on your smartphone
  - Search for "ZoomRx" in Apple or Android App Stores to download the app
  - Visit **zoomrx.com/users/login** to take survey on desktop/laptop
- Claim Your Profile
  - Enter your Name & State to claim your pre-filled ZoomRx profile
- **Start receiving surveys from January 15th, 2014**

We look forward to you joining the ZoomRx Psych Panel! Do not hesitate to contact us at info@zoomrx.com with any questions.

Sincerely
The ZoomRx Team

---

**To unsubscribe from ZoomRx communications,**
**Email us at info@zoomrx.com with subject UNSUBSCRIBE (or)**
**Fax your unsubscribe request to 617-401 3940**

Hello!!!
Testing...
1-855-330-1239

Thanks for selecting Nonsense.com as your partner

Test

Fax

Date 10/26/10

Total number of pages 3

To FaxToy

Fax number 1-888-877-4655

From Herman,Ben,STAMFORD,Information Services

Subject Test

AT-A-GLANCE

# DECEMBER 2012

MEMORANDA

IMPORTANT DATES

© [illegible] 30% post-consumer recycling materials. Made in the USA

November

| S | M | T | W | T | F | S |
|---|---|---|---|---|---|---|
| | | | | 1 | 2 | 3 |
| 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| 11 | 12 | 13 | 14 | 15 | 16 | 17 |
| 18 | 19 | 20 | 21 | 22 | 23 | 24 |
| 25 | 26 | 27 | 28 | 29 | 30 | |

December

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| 23 | 24 | 25 | 26 | 27 | 28 | 29 |
| 30 | 31 | | | | | |

January

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|---|---|---|---|---|---|---|
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| 13 | 14 | 15 | 16 | 17 | 18 | 19 |
| 20 | 21 | 22 | 23 | 24 | 25 | 26 |
| 27 | 28 | 29 | 30 | 31 | | |

February

| S | M | T | W | T | F | S |
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| 17 | 18 | 19 | 20 | 21 | 22 | 23 |
| 24 | 25 | 26 | 27 | 28 | | |

March

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| 17 | 18 | 19 | 20 | 21 | 22 | 23 |
| 24 | 25 | 26 | 27 | 28 | 29 | 30 |
| 31 | | | | | | |

April

| S | M | T | W | T | F | S |
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| 7 | 8 | 9 | 10 | 11 | 12 | 13 |
| 14 | 15 | 16 | 17 | 18 | 19 | 20 |
| 21 | 22 | 23 | 24 | 25 | 26 | 27 |
| 28 | 29 | 30 | | | | |

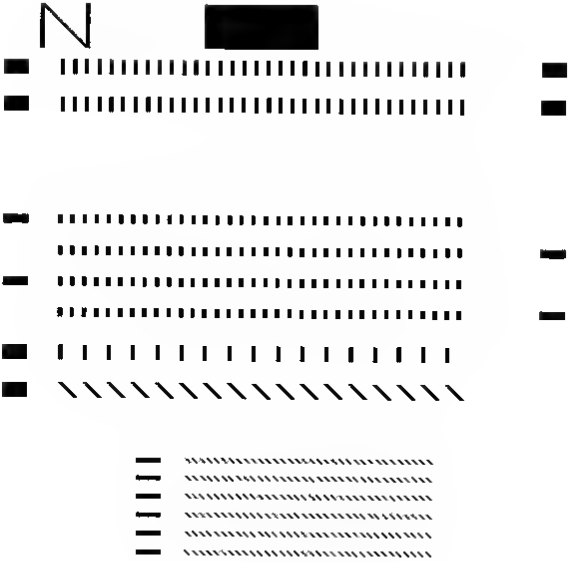
This is a test fax

Test

1572

TEST

ax
Test

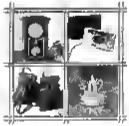

N
Test

# Select Your Gifts!

**BROWSE THROUGH OUR MANY DEPARTMENTS INCLUDING:**

**Accessories, Apparel, As Seen on TV, Auto, Camping, CD ROM Software, Clocks, Collectibles, Cutlery, Electronics, Flatware, Holiday Items, Jewelry, Kitchen, Lawn & Garden, Luggage, Magazines, Nascar, Office, Patriotic, Photography, Recreation - Outdoor, Sports, Sterling Craft, Sunglasses, Tools, Watches.**

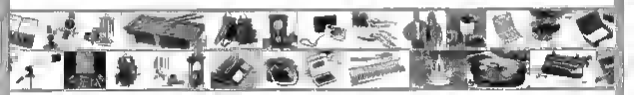
**New Kids/Teen Section Added - Education Software & Games For All Ages**



**STARTING YOUR SHOPPING SPREE IS AS EASY AS 1, 2, 3:**

**1) Log on to *www.selectyourgifts.com***
**2) Enter your Certificate Number and Password**
**3) Start Selecting Your Gifts!**

**Return as often as you wish , we keep a running total of your balance.**



## $1000 GIFT CERTIFICATE

**This certifies that the holder of this Certificate is entitled to order**

**ONE THOUSAND DOLLARS**

**worth of merchandise and services from the Select Your Gifts online catalog without any product charges* whatsoever.**

**To Redeem this Certificate go to: www.selectyourgifts.com**

**Certificate #: CZ501786 Password #: 2532**

(If you do not have access to a computer and would like to receive a catalog, send $4.95 S&H to Select Your Gifts, Attn: Catalog, 3880 Investment Ave #101 Riviera Beach, Florida 33404)

*Only pay shipping/handling per item sold in one order $6 per order maximum.

This Gift Card is valid for $1000 in a Basic state of first use.

TEST PAGE 1 2 3 4 5 6 7

# INT'L FAX TEST PAGE

Lorem ipsum dolor sit amet, consectetur adipiscing elit. Praesent tincidunt ultrices lorem, eu vestibulum dolor rutrum id. Cras enim diam, cursus ac cursus vel, congue id erat. Aliquam erat volutpat. Nam congue, neque ac rhoncus pulvinar, sem purus congue justo, quis accumsan nunc tellus id ante. Donec tellus libero in erat egestas pharetra interdum id ipsum. Cras consectetur, sapien in varius scelerisque, mi ex sollicitudin sem, eu fermentum enim eros quis tortor. Phasellus tincidunt mattis leo sit amet eleifend. Praesent eu arcu vitae velit volutpat hendrerit non vitae eros. Pellentesque a massa mi. Proin sollicitudin venenatis dui, et malesuada risus condimentum eget. In hac habitasse platea dictumst.

| Column 1 | Column 2 | Column 3 | Column 4 | Column 5 |
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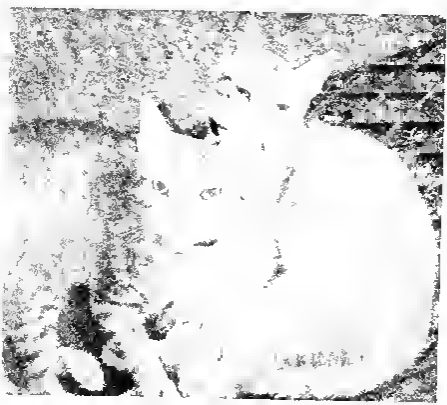
| text | text | text | text | text |



Aenean et orci eros. Interdum et pinterd augue. Suspendisse ac pretium ante. Nam vitae est odio, in dapibus ligula. Fusce luctus sagittis magna, bibendum commodo mauris vehicula non. Nam dapibus pellentesque libero, a dictum est cursus ac. Praesent mattis, purus vel faucibus pretium, justo nisl varius nisl, ut semper velit neque et nisl. Pellentesque habitant morbi tristique senectus et netus et malesuada fames ac turpis egestas. Vestibulum pharetra lacus at turpis gravida dapibus. Aliquam vel metus sit amet sapien auctor mattis nec vitae nisi. Mauris consequat dictum massa, sed ultrices. Integer tincidunt pellentesque neque at fermentum. Integer pretium accumsan dignissim. Vivamus vitae purus in purus ultrices volutpat. Vestibulum ante ipsum primis in faucibus orci luctus et ultrices posuere cubilia Curae;

Test Faxing

1510545 0990

Ryan - 011
Steve - 012
Ludge - 013
Norbert - 014
Harry - 015
Rick - 016

Misplaced
Childhood

| | |
|---|---|
| To | test |
| Fax number | 1-888-877 1955 |
| From | |
| Fax number | |
| Business phone | |
| Home phone | |
| Date & Time | 2/20/2010 3 11 44 PM |
| Pages | 1 |
| Re | test |

test

# ANTI-STRESS KIT

## DIRECTIONS

1. Place on FIRM surface
2. Follow directions provided in the circle
3. Repeat until you are anti-stressed or become unconscious

# FAX TEST

FAX

TEST

Test

1-855 [illegible] 1239

Gastroenterology Consultants of Toms River
3 Mule Road Suite E 15
Toms River NJ 08755
Phone 732-341 7460
Fax 732-914-3068

Date 7/17/2013

Priscilla Alberto MD
25 Mule Rd Suite A-3
TOMS RIVER
NJ 08755

**Consult Letter for John, Doe, DOB 02/16/1949**

Dear Dr Alberto

Thank you for the referral Here are the details of your patient s visit

**Chief Complaint**

**HPI**

**Vitals**

**Physical Exam**

**Problem/Dx**

**Notes**

Please call my office with any questions or concerns

Lisa Speranza FD / Biller

*Valid only if transmitted by facsimile machine

# FAX A DOCUMENT

CAPESPACE FAX NUMBER: [028] 808-6370

## Step 1. Enter password

If you were not given or do not know your password, ask the CapeSpace staff

## Step 2. Insert document

Place paper on the document feeder, or inside the scanning compartment

## Step 3. Press "Fax/Scan" button

## Step 4. Click "Direct Input"

## Step 5. Click "Fax"

## Step 6. Type phone number, then press OK

## Step 7. Press "Start" button

Your document will be scanned and sent

**DUMMY FAX DOCUMENT**

**NO CONTENT HERE**

Yukon
Education
Éducation

PDF Test File

Congratulations your computer is equipped with a PDF (Portable Document Format) reader! You should be able to view any of the PDF documents and forms available on our site PDF forms are indicated by these icons or

Yukon Department of Education
Box 2703
Whitehorse Yukon
Canada
Y1A 2C6

Please visit our website at http://www.education.gov.yk.ca

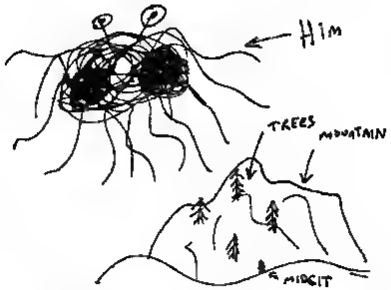
# GOD?

**Is he a flying monster made of spaghetti?**

**P1. The Flying Spaghetti Monster is a being which has every perfection.**

**P2. Existence is a perfection.**

**C. Therefore, the Flying Spaghetti Monster exists.**



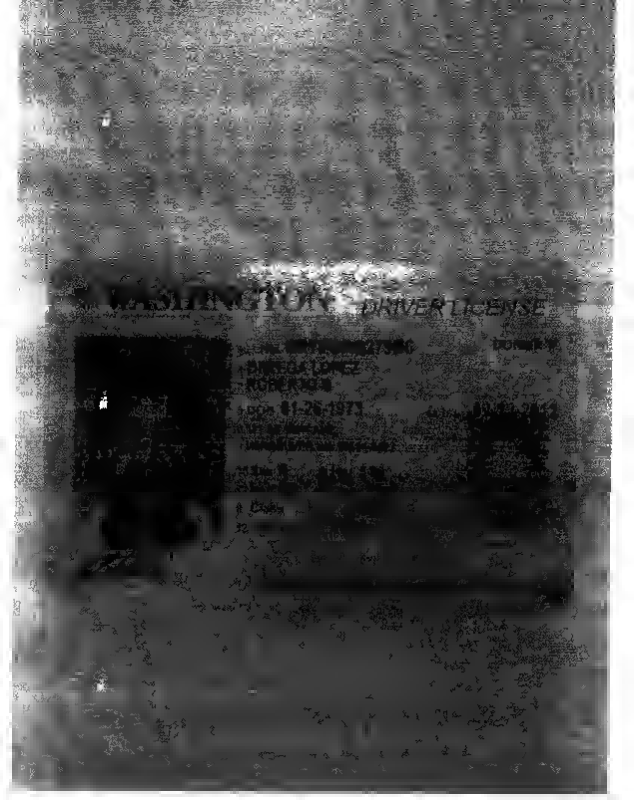

**Check out the most logical and fastest growing religion on the planet!**

**www.venganza.org**

Blood

Sugars

Test



# FAX TEST

TOP

12345678

LEFT

Embedded Font ABC 123

12345678

Eight 8 Point
Ten 10 Point
Twelve 12
Fourteen

X

# US LETTER FAX TEST PAGE

X

Eight 8 Point
Ten 10 Point
Twelve 12
Fourteen

12345678

© 2009 by FaxLogic LLC

RIGHT

BOTTOM

12345678

you hp

FaxBack System Test

[illegible] for [illegible]

## Other useful hp web sites

[illegible]
[illegible]

[illegible]
[illegible]

[illegible]
[illegible]

## Help us help you

[illegible]

[illegible]

invent

[illegible]
[illegible]

Hello, Testing my FAX machine

Test

5169

BS

test fax

# FAX COVER SHEET

| | |
|---|---|
| TO | rrr |
| COMPANY | rrr |
| FAX NUMBER | 18553301239 |
| FROM | Long Nov cho tok |
| DATE | 2014-12-15 08:36:20 GMT |
| RE | Hello |

COVER MESSAGE

TEST TEST TEST

WNZN G4 W7 3D
Verizon
Wireless DSL
Gateway
GT784WNV
Wireless Security Setup

BACKOFFICE

TEST

FAX

1-888-877-1655

1-503-200-1300

2326

TEST 1

Lucent LT Winmodem (Agere chipset) (winmodem?)
$25

Zoom V 92 USB Mini 3095
$45
DCC modem (softmodem)

http://mainstreetanswers.org/zoom_3095.php

https://www.thinkpenguin.com/gnu-linux/usr-zoom-3095-56k-dial-modem-gnulinux-ubuntu-support

Help

Tom

# You're The Expert

## Parent Questionnaire

In order for me to establish a clear picture of your child's learning habits and strengths I would like to gather some information. I invite you to share your child's talents and interests with me in this short questionnaire. Please return this sheet to me on your child's assessment day

Thank you for your time
Ms. Susan

Child's name_____

Two words that describe him/her _____

He/She enjoys _____

He/She does not enjoy_____

The thing he/she likes best about school is _____

One difficulty he/she has at school is _____

Academically, I would like to see him/her work on _____

_____

Socially, I would like to see him/her work on _____

_____

Additional information about your child to help make this year a success_____

_____

_____

Parent/Guardian Signature _____

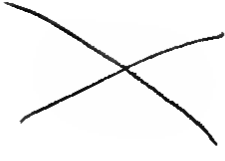
FAX

TMG

1500 NW 118th Street Des Moines Iowa 50325
p 515 457 2000 | 800 268 1884

| | | | |
|---|---|---|---|
| To | fax 18553301239@fax.tmg.net | From | David Johnson |
| Fax | 18553301239 | Phone | 5154572000 |
| Date | 3/24/17 Time 3:40:58 PM | Pages | 1 including cover page |

# TEST OUT FAX



688 Columbus Avenue @ 93rd St 212 961-9600 www.gabrielas.com

HP Officejet 6500 E709n All-in-One series

Fax Log for
Bill Harris
928-395-0907
Mar 09 2011 9:15AM

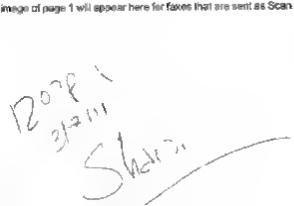
Last Transaction

| Date | Time | Type | Station ID | Duration | Pages | Result |
|---|---|---|---|---|---|---|
| | | | | Digital Fax | | |
| Mar 9 | 9:14AM | Fax Sent | 18008056003 | 0:54<br>N/A | 1 | Error 350* |

* A communication error occurred during the fax transmission. If you're sending, try again and/or call to make sure the recipient's fax machine is ready to receive faxes. If you're receiving, contact the initiator and ask them to send the document again.

Note:
Image on Fax Send Report is set to Off

An image of page 1 will appear here for faxes that are sent as Scan and Fax



FUSIONPBX

Sample header

# FAX
COVER SHEET

**TO** Sample recipient (18553301239)

**FROM** Test Fax Caller ID (8452222222)

**SUBJECT** Test subject

Sample message

**JUST 27 WORDS**

**GOD OUR FATHER,
WALK THROUGH MY HOUSE
AND TAKE AWAY ALL MY WORRIES AND ILLNESSES;
AND PLEASE WATCH OVER AND HEAL MY FAMILY
IN JESUS ' NAME.. AMEN**

**This prayer is so powerful.
Pass this prayer to all your friends.**

Ayy

LMAO

LIFE

IS CIT

MORTON SALT

To: 1-855-330-1239 faxtoy.net

From 1-903-962 5100 Front Office

Date: 6/15/17

RE: test of outgoing Front Office fax using 1

13

Test results _____

you + hp

FaxBack System Test

Thank [illegible] using hp

## Other useful hp web sites

**www.hp.com/register**
Use this web address to register your HP product

**www.hp.com/support**
Use this web address for online technical support for your product

**www.hpshopping.com**
Use this web site to order supplies and accessories for your [illegible]

## Help us help you

We're interested in your feedback on this interaction process. Send us your comments to:

fax.feedback@hp.com

invent

Visit http://www.hp.com/cgi-bin/privacy for hp's privacy statement
www.hp.com

NORTHWEST ARKANSAS PATHOLOGY ASSOCIATES, P.A.
3309 EAST LINDSEY STREET, FAYETTEVILLE, AR, 72703 (479) 442-0144

Gynecological Cytology(CS) Report

**Patient Information**

**Name:** Janey Bird
**Age:** 62 **Sex:** Male
**DOB:** 05/05/1955
**Medical Record#:** 55555555555
**Encounter#:** 5555555

**Physician Information**

**Ordering:** Abir Ahmad MD
15440 Laguna Canyon Rd, Suite 260, Irvine 92618

**Accession# 21282**

**Case#** C017-2
**Date Collected** 02/01/2017
**Date Received** 02/1/2017
**Date Reported** 02/02/2017 11:30:36 AM

**CC**: Elham Ahmad

**CLINICAL HISTORY**

**LAST MENSTRUAL PERIOD:**
N/A

**CONTRACEPTIVE HISTORY**
N/A

**FINAL DIAGNOSIS**
ATYPICAL SQUAMOUS CELLS OF UNDETERMINED SIGNIFICANCE

**COMMENT**

**PREVIOUS 3 years PAP/HPV HISTORY:**
N/A

**SPECIMEN SOURCE:**
A.Cervical manual smear

Electronically Signed Out
Helix Administrator 02/02/2017 11:14:56 AM

**CPT:**
88164 88141
609 W Maple Springdale,AR 72764 **#CLIA** 6401053967

TEST

Hi

Homer

— R Wood

~~#2~~ - #3

#4

TESTED!

*** FAX SENDING RT REPORT ***

TX COMMUNICATION WAS NOT COMPLETED

| | |
|---|---|
| JOB NO. | 6131 |
| DESTINATION ADDRESS | 18553012130 |
| SUBADDRESS | |
| SENDER ID | |
| DCT START | 10/14 15:28 |
| TX/RX TIME | 00'03 |
| PGS. | 8 |
| RESULT | NG |

0 0718 BUSY/NO SIGNAL

Steel rod

Lumosity.com

Welcome to

eFax Cust

to the

Images are

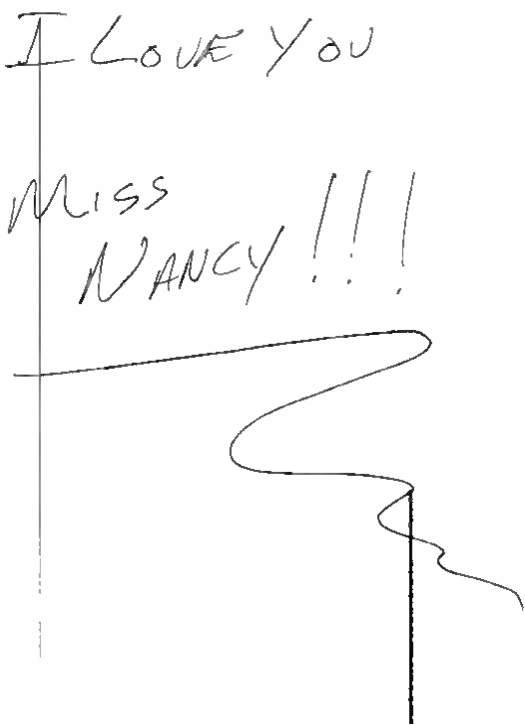
Du

Welc
servic

Ac

| | |
|---|---|
| To | 18888771655 |
| Date & Time | 2/21/2014 9:16:17 AM |
| Pages. | 4 |

TEST TIFF


I LOVE YOU
MISS
NANCY!!!

From

| | |
|---|---|
| Company | Modern Medical Clinic |
| Address | 3911 Morris Road<br>Flower mound,TX 750282648 |
| Fax No | 972-691-1444 |
| Phone No | 972-874-3774 |

Confidential Healthcare Information If you are not the intended receiver
Please destroy this immediately and call us at above numbers

To

Fax No 8889771655

Note Testing the fax line

## JUMPER

★★★★★

"My daughter loves to wear them every day to school Great fit and feelll"

- MISSOURI

DRESSES FROM

$10

## SHORTS

★★★★★

"Love these shorts! They look nice and my boys say they are very comfortable."

- CALIFORNIA

SHORTS FROM

$10

I love
my wife
Charlotte
Hammond

Foundation for Foreign Study

IIE/Foundation for Foreign Study
One Education Street
Cambridge, MA 02141

Fax: 617-619-1401
effoundation.org

# IEC Reimbursement for Expenses

**IEC INFORMATION**

Name _____

Address

Street _____

City _____ State _____ Zip _____

Phone _____ Home (___) _____ Work (___) _____

**REIMBURSEMENT INFORMATION**

**Fill expenses no later than one month after the event.** Expenses not claimed within two months from the date incurred will not be reimbursed. **Please number all receipts and tape them flat to a separate piece of paper.** Absolutely no expense will be reimbursed without original receipts. Send this form and your receipts to your Program Support Manager for processing.

| Item and reason for expense (RPM/PSM pre-approval required) | Receipt # | Amount |
|---|---|---|
| Mileage _____ miles @ $.51 per mile for _____ | _____ | _____ |
| Postage _____ | _____ | _____ |
| Travel expenses (please specify) _____ | _____ | _____ |
| Hotel costs _____ | _____ | _____ |
| Daily meal allowance _____ | _____ | _____ |
| Other _____ | _____ | _____ |
| Other _____ | _____ | _____ |
| Other _____ | _____ | _____ |

**Total expense claim** _____

_____ _____

Regional Coordinator's signature Date

_____ _____

Program Support Manager's signature Date

**OFFICE USE ONLY**

Account: _____ Project _____

CCS _____ Team # _____

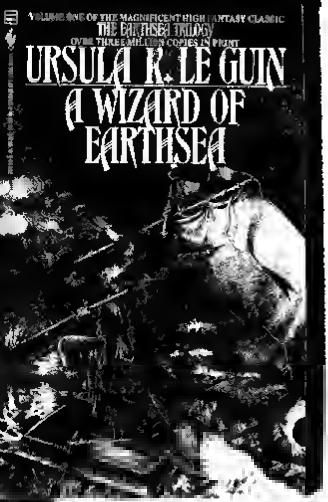
Product _____ Regional Director _____

TEST

PRACTICE

MIX
Paper responsible sources
FSC
FSC® C015848

**Return address.**
LV=, County Gates, Bournemouth
BH1 2NF


A VOLUME ONE OF THE MAGNIFICENT HIGH FANTASY CLASSIC
THE EARTHSEA TRILOGY
OF THE THREE MILLION COPIES IN PRINT
URSULA K. LE GUIN
A WIZARD OF EARTHSEA

PCC Name
PAT RYDE

TELEMARKETERS DAILY UPDATE FORM

Date
6/2/14

Name	Phone #	Spouse Y/N	Apt Date	Apt Time	Location	User Y/N	Age of Aid(s)	CC=Cold Call MU-ME Users
VIRGINIA ALLERDING	231-526-9477	N			PETOSKEY	Y	8	MU
MICHAEL BAITY	231-526-9482					Y	7	MU
ROBERT BALL	231-347-4421					N		CC
BILL BECHEK	231-349-0133					N		CC
MIKE BEHLING	231-459-4207					N		CC
TERRY BELFORD	231-582 7874					N		CC
CLARENCE BELLMER	231-347-8425					N		CC
NELSON BENNETT	231-544-8759					Y	5	MU

AM GOING THRU THE FILES ALPHABETICALLY

# of calls # contacted # no internal users # call backs # of resets # of appts Hours Telemarketed 3

Aurora, OH - Fluid Power
315 Lane Dr Aurora OH 44202

| CORPORATE REQUIREMENT | declared/ Signed |
|---|---|
| Acknowledge & Responsible Conduct Policy | |
| Drug & Alcohol Abuse Policy | |
| Smoke Free Policy | |
| Summary of Rights Under FCRA | |
| LOCATION SPECIFIC REQUIREMENT | |
| Temporary Worker Orientation Guidelines & Checklist | |

A B A A / /

W X

Y Z

A

A

## Jeff Daug
3
6/16/14-6/30/14

| DATE | IN | OUT | WORKED | HOURS | OVERTIME |
|---|---|---|---|---|---|
| | | | 0 00 | | |
| 17TU | 8:50 | 12:52 | 4 03 | 4 05 | |
| 17TU | 1:49 | 5:59 | 9:18 | 8.18 | |
| 18WE | 9:44 | 12:19 | 3.35 | 11.73 | |
| 18WE | 12:39 | 6:12 | 9:10 | 17.08 | |
| 19TH | 9:05 | 9:46 | 0.85 | 18.13 | |
| 19TH | 1:41 | 6:00 | 5.17 | 22.45 | |
| 20FR | 8:46 | 12:24 | 3 60 | 26.08 | |
| 20FR | 12:48 | 12:55 | 3 83 | 29 28 | |
| 20FR | 1:57 | 9:09 | 7.15 | 29.60 | |
| 22MO | 8:46 | 12:22 | 3-70 | 33 30 | |
| 22MO | 12:58 | 5:06 | 8.65 | 38.25 | |
| 24TU | 8:48 | 12:42 | 3.90 | 42.15 | |
| 24TU | 1:26 | 4:57 | 7.42 | 45.47 | |
| 25WE | 9 52 | 12:22 | 3 50 | 49.17 | |
| 25WE | 1:07 | 5:07 | 7.42 | 53.08 | |
| 26WE | 5:07 | 6:56 | 9 07 | 54 73 | |
| 26TH | 8:48 | 12:37 | 3 65 | 58 38 | |
| 26TH | 1:06 | 4:57 | 7 47 | 61.90 | |
| 27FR | 8:44 | 12:49 | 3.08 | 64 98 | |
| 27FR | 12:35 | 5:00 | 7.50 | 69 40 | |
| 30MO | 8:54 | 11:59 | 3 07 | 72 47 | |
| 30MO | 12:43 | 5:31 | 2 97 | 77.27 | |

FEIT 2 TIME CLOCKS HAWAII, Honolulu, Hawaii (808) 847-5788

003

## Jarrel Chun Ming
5
6/16/14-6/30/14

| DATE | IN | OUT | WORKED | HOURS | OVERTIME |
|---|---|---|---|---|---|
| | | | 0.00 | | |
| 16MO | 5:26 | 3:07 | 9 70 | 9 70 | |
| 17TU | 5:28 | 3:12 | 9.73 | 19.43 | |
| 18WE | 5:30 | 3:02 | 9.53 | 28.97 | |
| 19TH | 5:25 | 3:04 | 9.65 | 38 45 | |
| 20FR | 5:26 | 3:04 | 9.63 | 48.08 | 8.08 |
| 23MO | 5:26 | 3:01 | 9.58 | 49.58 | |
| 24TU | 5:28 | 3:06 | 9 63 | 59.22 | |
| 25WE | 5:33 | 3:02 | 9.48 | 68.70 | |
| 26TH | 5:24 | 3:03 | 9.48 | 78.18 | |
| 27FR | 5:37 | 3:09 | 9 53 | 80 00 | 15.80 |
| 28SA | 5:23 | 7:50 | 2 45 | 80.00 | 19 25 |
| 30MO | 5:31 | 3:12 | 9.68 | 89.68 | |

FEIT 2 TIME CLOCKS HAWAII, Honolulu, Hawaii (808) 847-5788

005

## Lyman Ashikawa
4
6/16/14-6/30/14

| DATE | IN | OUT | WORKED | HOURS | OVERTIME |
|---|---|---|---|---|---|
| | | | 0.00 | | |
| 19ME | 8:57 | 8:25 | 2 13 | 2.13 | |
| 21SA | 8:07 | 6:08 | 10.85 | 12.98 | |
| 25WE | 9:50 | 9:50 | 0 00 | 12.98 | |
| 28SA | 8:18 | 6:45 | 10.45 | 23.43 | |

AT&T TIME CLOCKS HAWAII, Honolulu, Hawaii — (808) 847-5788

001

## To Use **WITHOUT** Computer

## To Use **WITH** Computer

## Features

## Installation Help

TEST

DELTA
AIR LINES

Memo

To: All Employees
From: HR / Delta Pay Team
Re: Employee Airline Discount

Cancun, Puerto Vallarta, Jamaica or Hawaii

6 Days & 5 Nights all meals included for only **$129** Per Adult

- *Dates:* You choose your dates. Packages are open dated and valid for **1 full YEAR**

Included in package:

- *Resort stay*: Choose your 4-5 star resort
- *Corporate Meal Plan*: All Meals and drinks [illegible] included 24 hrs a day
- *Children stay and eat for free*
- *Unlimited activities including non-motorized water sports*

First
500
Reserve
Up to 60 % off
Flight

Free Bonus

5 Days 4 Nights Orlando

&

3 Days 2 Nights Miami

Booking and Reservations at (877) 493 – 8854

Reservations code: STAYWARM

[illegible] number [illegible] please call 1-[illegible]

HP Officejet Pro 8600 N911n Series

Fax Log for
9736515155
9736515155
Feb 08 2016 2:13PM

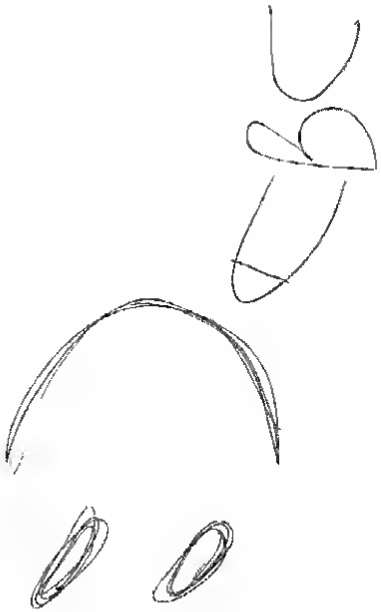
Last Transaction

| Date | Time | Type | Station ID | Duration | Pages | Result |
|---|---|---|---|---|---|---|
| | | | | Digital Fax | | |
| Feb 6 | 2:11PM | Fax Sent | 8553301239 | 0:00<br>N/A | 0 | No answer |

v13 EN*
Æéÿÿÿÿÿÿÿÿ build 5055
G8QQ8EXJ-DQ8ZWY84-C7PKVGXH-V745AMTC-JAA96T5F-E44AZP6V-Y2T8MXNG-NH5XWYDJ

Word

TEST



Check ME Out
Now

TRANSMISSION VERIFICATION REPORT

TIME	01/04/2011 04:50
NAME	
FAX	
TEL	
SER #	U62781L2Y783773

DATE,TIME	01/04 04:49
FAX NO./NAME	[illegible]
DURATION	00:00:35
PAGE(S)	00
RESULT	NG
MODE	STANDARD

NG: POOR LINE CONDITION / OUT OF MEMORY

mike
was
here!

juan s test

# PCL5 Font Listing, Page 3

## Resident Fonts

| Position | Font Name | Font Sample |
|---|---|---|
| 36 | Courier<br>=Esc>(8Y>Esc>(s1p>s1pos>v0s0b16602T | ABCDEFGabcdefg0123456789&?! |
| 35 | Courier Bold<br>=Esc>(8Y>Esc>(s1p>s1pos>v0s3b16602T | **ABCDEFGabcdefg0123456789&?!** |
| 36 | Courier<br>=Esc>(8Y>Esc>(s1p>s1pos>v0s0b16602T | ABCDEFGabcdefg0123456789&?! |
| 37 | Courier Bold<br>=Esc>(8Y>Esc>(s1p>s1pos>v0s3b16602T | **ABCDEFGabcdefg0123456789&?!** |
| 38 | Arial<br>=Esc>(8Y>Esc>(s1p>s1pos>v0s0b16602T | ABCDEFGabcdefg0123456789&?! |
| 39 | Arial Bold<br>=Esc>(8Y>Esc>(s1p>s1pos>v0s3b16602T | **ABCDEFGabcdefg0123456789&?!** |
| 40 | Arial Italic<br>=Esc>(8Y>Esc>(s1p>s1pos>v1s0b16602T | *ABCDEFGabcdefg0123456789&?!* |
| 41 | Arial Bold Italic<br>=Esc>(8Y>Esc>(s1p>s1pos>v1s3b16602T | ***ABCDEFGabcdefg0123456789&?!*** |
| 42 | Times New Roman<br>=Esc>(8Y>Esc>(s1p>s1pos>v0s0b16901T | ABCDEFGabcdefg0123456789&?! |
| 43 | Times New Roman Bold<br>=Esc>(8Y>Esc>(s1p>s1pos>v0s3b16901T | **ABCDEFGabcdefg0123456789&?!** |
| 44 | Times New Roman Italic<br>=Esc>(8Y>Esc>(s1p>s1pos>v1s0b16901T | *ABCDEFGabcdefg0123456789&?!* |
| 45 | Times New Roman Bold Italic<br>=Esc>(8Y>Esc>(s1p>s1pos>v1s3b16901T | ***ABCDEFGabcdefg0123456789&?!*** |
| 46 | Helvetica<br>=Esc>(8Y>Esc>(s1p>s1pos>v0s0b24580T | ABCDEFGabcdefg0123456789&?! |
| 47 | Helvetica Bold<br>=Esc>(8Y>Esc>(s1p>s1pos>v0s3b24580T | **ABCDEFGabcdefg0123456789&?!** |
| 48 | Helvetica Oblique<br>=Esc>(8Y>Esc>(s1p>s1pos>v1s0b24580T | *ABCDEFGabcdefg0123456789&?!* |
| 49 | Helvetica Bold Oblique<br>=Esc>(8Y>Esc>(s1p>s1pos>v1s3b24580T | ***ABCDEFGabcdefg0123456789&?!*** |
| 50 | Helvetica Narrow<br>=Esc>(8Y>Esc>(s1p>s1pos>v4s0b24580T | ABCDEFGabcdefg0123456789&?! |

TEST

# CANCELLATION

Wednesday, October 28, 2015

To: Bhatu Bear INN Hotel & Suite 1
Fax +1(855) 306 3259
Attn: Alesh Patel
Subject: Cancellation Confirmation

| Cancellation Confirmation |
| --- |
| 9GE87L28-3139-3123 |
| Created: 10/28/2015 07:36:50 GMT |
| Fax Source: PMS |

Dear Alesh Patel,

We have received the following cancellation for the reservation mentioned below. Please find the confirmation number for your cancellation. If you have any questions regarding this cancellation, please contact us at +1 (855) 306 3259 or email help@travelclick.com.

Thank You
TravelClick

Room Details

| Arrival Date | October 28, 2015 | Departure Date | October 29, 2015 |
| --- | --- | --- | --- |

Guest Details

| First Name: | M | Last Name: | Test user |
| --- | --- | --- | --- |

Special Instructions: Cancellation Agent: Please do not charge the guest's credit card for this reservation.

| Date | Label | Amount |
| --- | --- | --- |
| | Late | October 28 |
| | Total | 99.00 |

Sub-Total: 99.00
Tax (17.5%): $17.33 - Total: 99.00

Rate Description: Rate Code: Rate Code Desc

Guest 1 - Mr Test

| First Name: | Mr | Test | Last Name: | Practice |
| --- | --- | --- | --- | --- |

Special Instructions: Cancellation Agent: Please do not charge the guest's credit card for this reservation.

| Date | Label | Amount |
| --- | --- | --- |
| | Late | October 28 |
| | Total | 99.00 |

Sub-Total: 99.00
Tax (17.5%): $17.33 - Total: 99.00

Rate Description: Rate Code: Rate Code Desc

Test

Please

CHECK HERE ☐ if your address is different from the one shown on your renewal

PLACE STAMP HERE

AMERICAN QUARTER HORSE ASSOCIATION
PO BOX 36300
AMARILLO TX 79120-6300

30
20
30
45
35
575
525
300
50

# Provider Information

**You don't have time to guess that's why we put all the documents you need in one place.**

Use the navigation items on the left to find what you're looking for fast.

## Contact Us

**General Postal Mailing/Correspondence:**

UnitedHealthcare Community Plan
P.O. Box 300089
Newark, NJ 07188

**Claim Address:**

Medicaid and NJ Familycare:
UnitedHealthcare Community Plan
P.O. Box 5250
Kingston, NY 12402-5250

UnitedHealthcare Dual Complete (Medicare):
UnitedHealthcare Dual Complete
P.O. Box 5250
Kingston NY 12402-5250

**Claim Appeal Address:**

This is a TEST.

This is only a TEST.

Testing, testing,

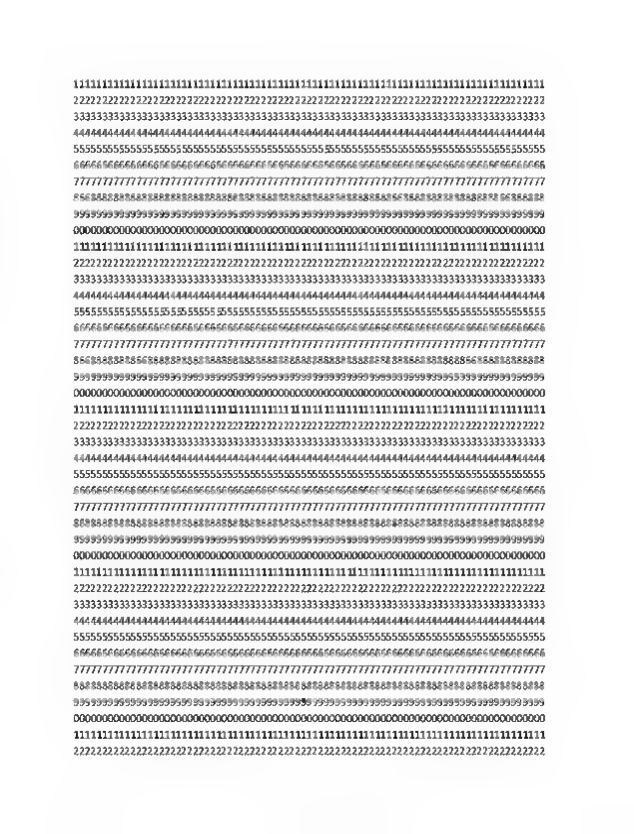
1-2-3 testing.

This Is A Test!

Test #2

Adlkjalkjf
adf;lkj;.,lkfj
asd fj;,alskfj
as lfjl askjdf

TT FAX 1



# Windows Printer Test Page

```
Congratulations!

If you can read this information, you have correctly installed your Canon MF8000
Series (FAX) on DAVIDSAMSUNG-PC

The information below describes your printer driver and port settings.

Submitted Time      20_04_5A 6/23/2013
Computer Name       DAVIDSAMSUNG-PC
Printer Name        Canon MF8000 Series (FAX)
Printer Model       Canon MF8000 Series (FAX)
Color Support       No
Port Name           10.212.78.10"
Data Format         RAW
Share Name
Location
Comment
Driver Name         CNPRGM_UD64.dll
Data File           MF8000FU.xpc
Config File         CNPRGMUI_UD64.dll
Help File           CNPRUI0.chm
Driver Version      4.03
Environment         Windows_x64
Monitor             Canon Language Monitor1

Additional Files used by this driver

C:\Windows\System32\spool\DRIVERS\x64\3\MF8000FU.CFG
C:\Windows\System32\spool\DRIVERS\x64\3\CNFRUIMF9_UD64.dll    (4.03.0.0)
C:\Windows\System32\spool\DRIVERS\x64\3\Crx2Res.dll    (3.03.89)
C:\Windows\System32\spool\DRIVERS\x64\3\CNXADR.dll    (2.05.0.0)
C:\Windows\System32\spool\DRIVERS\x64\3\CNXCR.dll    (4.03.0.0)
C:\Windows\System32\spool\DRIVERS\x64\3\CNX_CR.ini    (2.03.0.0)
C:\Windows\System32\spool\DRIVERS\x64\3\CNXDMAN.dll    (2.03.0.0)
C:\Windows\System32\spool\DRIVERS\x64\3\CNX_SHGL.dll    (2.05.0.0)
C:\Windows\System32\spool\DRIVERS\x64\3\CNX2IPUI.dll    (4.0.0.0)
C:\Windows\System32\spool\DRIVERS\x64\3\CnFXUTS.dll    (4.03.0.0)
C:\Windows\System32\spool\DRIVERS\x64\3\CNFX2_56.ini
C:\Windows\System32\spool\DRIVERS\x64\4\CNFXEUA.dll    (3.05.0.0)
C:\Windows\System32\spool\DRIVERS\x64\3\CNFX2UA.chm
C:\Windows\System32\spool\DRIVERS\x64\3\CNFX2UC.dll    (2.03.0.0)
C:\Windows\System32\spool\DRIVERS\x64\3\CNFX2_CS.dll    (2.05.0.0)
C:\Windows\System32\spool\DRIVERS\x64\3\CNFXEDS.dll    (4.0.0.0)
C:\Windows\System32\spool\DRIVERS\x64\3\CNFX2THS.dll    (4.03.0.0)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCUIS.dll    (5.2.2.2)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCUIS.ini    (5.2.2.4)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCUDD.exe    (5.2.2.4)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCUDQ.exe    (5.2.2.4)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCUD.dll    (5.2.2.4)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCUDW.exe    (5.2.2.1)
C:\Windows\System32\spool\DRIVERS\x64\3\CrX2LF37.dll    (2.3.0.0)
C:\Windows\System32\spool\DRIVERS\x64\3\CrX_C32.dll    (2.2.2.0)
C:\Windows\System32\spool\DRIVERS\x64\3\CNX-V142.dll    (2.2.0.1)
C:\Windows\System32\spool\DRIVERS\x64\3\CrX2TA32.dll    (2.2.0.0)
C:\Windows\System32\spool\DRIVERS\x64\3\UCS32.dll    (2.2.2)
C:\Windows\System32\spool\DRIVERS\x64\3\CNCKPP
C:\Windows\System32\spool\DRIVERS\x64\1\CNFXCM42.dll    (1.1.0.0)
```

Test Fax
765-288-4585

Free
Test Fax

1 855 330-1239

recieve

=== COVER PAGE ===

TO: _____

FROM: _____

FAX:

TEL:

PAGE[S] TO FOLLOW

COMMENT:

CANCELLATION

INNsight.com

Tuesday, February 03, 2015

Fax To: [illegible] HOTEL SUITE
Fax: +1(212)-204-2045
Attn: Ajesh Chandran
Subject: Cancellation Confirmation

Cancellation Confirmation
21423AE3-41[illegible] 2[illegible]
Created: 02/03/2015 12:11:13 GMT
Sub-Source: STANDALONE

Dear Ajesh Chandran,

We have received the following cancellation [illegible] [illegible]

Thanks,
INNsight.com

CANCELLATION REASON

test

BOOKING DETAILS

Number of Rooms	1	Number of Nights	4
Check In Date	April 5, 2015	Check Out Date	April 9, 2015

Room 1, [illegible] Adults 2 Children 0

First Name	testing1	Last Name	testing2

[illegible]

Room Rates	Date	April 5	April 6	April 7	April 8
	Rate	$0.00			

Sub-Total: $0.00
Tax (10%): $0.00 Total: $0.00

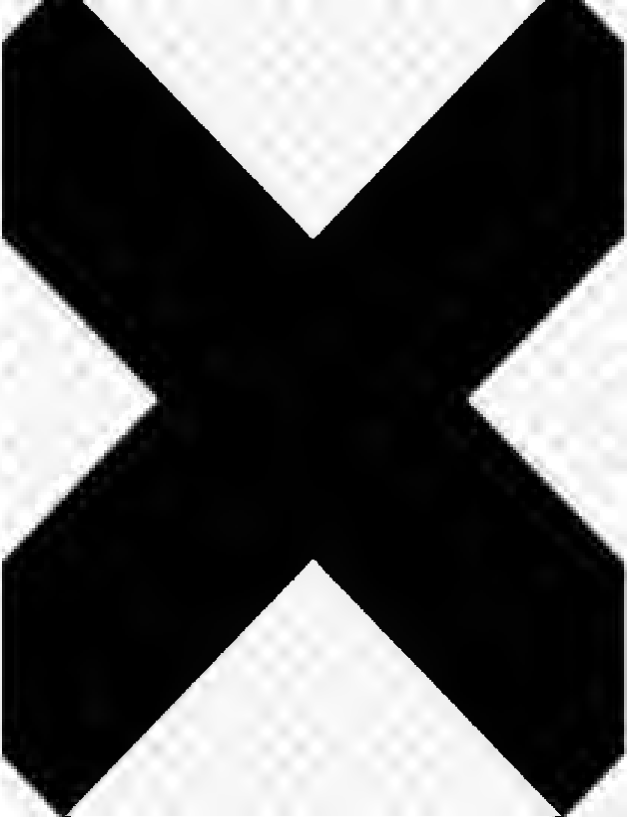
Note: [illegible]

Thanks for [illegible]

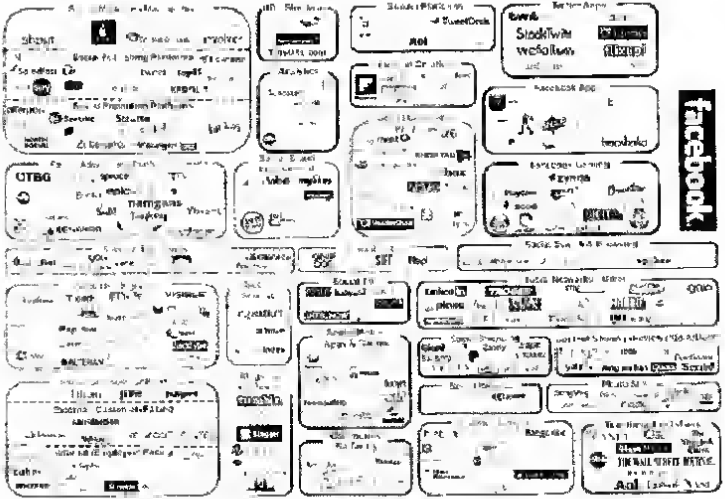
TEST

Test
8/31

Internal modem test from keyboard of Falcon to ASRock VIA Test review



Your in-store coupon!
25%
Off a Single Item
25BARKERS
OLD NAVY
0478
Offer valid from 2/6/2011 through 2/12/2011 at Old Navy stores in the U.S. and Canada. Not valid online. Offer excludes clearance items. Discount applies to merchandise only, not sales of gift cards, purchased packaging or applicable taxes. Coupon is good for one time use only and must be surrendered at time of in-store purchase. No adjustments on previous purchases. Limit one coupon per customer per transaction. Cannot be combined with other offers or discounts including Gap Inc. employee discount. Not valid for cash or cash equivalent. Offer is non transferable. Gap Inc. is not responsible for lost or stolen coupons. Returns and exchanges are subject to Old Navy store's return policy.
CASHIER: scan barcode or enter discount code. Discount will be applied at total. Complete transaction as normal.


facebook.

7675

FAX

TEST

#7

Monday September 14, 2015

| Reservation Confirmation |
| --- |
| 2F9DEFAA-1D05-5822 |
| Created: [redacted]/2015 10:50:19 GMT |
| Booking Source: Stonehorse |

For/To: **Emma Linda Mellot**
Fax: 1(555) 330 3239
Attn: **Daniel Pinchall**
Subject: Booking Confirmation

Dear Daniel Parrilla:

Thank you for booking your travel with us. Please review the following information carefully and contact us immediately if there is any discrepancy. If you have any questions, please contact us at [redacted]@flyinsight.com.

Sincerely,
Insight Travel

## Traveler Information

| | | | |
| --- | --- | --- | --- |
| Traveler: | Mirsha Sinchury | Name: | Alaska |
| Address: | Hotel | Phone: | 4245745 |
| City: | Akiachak | Country: | USA |
| Email Address: | mirsha.sinchury@insight.com | Telephone Number: | 3534879348864 |

## Billing Information

| | | | |
| --- | --- | --- | --- |
| Card Type: | Visa | Exp Date: | 09/2015 |
| Card Number: | 4111111111111111 | Billing Zip: | 43845 |
| | | Grand Total: | $320.00 |

## Travel Itinerary

| | | | |
| --- | --- | --- | --- |
| Number of Weeks: | 1 | Number of Units: | 1 |
| Check In Date: | September 14, 2225 | Check Out Date: | September 15, 2015 |

## Traveler Details

| First Name: | Mirsha | Last Name: | Sinchury |
| --- | --- | --- | --- |

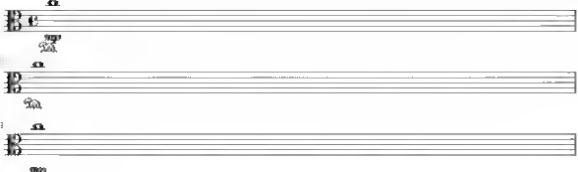
| | | |
| --- | --- | --- |
| Reservation | Date: | Sep 14 |
| | Rate: | $120.00 |

Sub-Total: $120.00
Tax (0.00%) = Total: $120.00

Note: Service Fee for Extra Person is Free

Special Request: Highchairs

Thank you for choosing Insight Travel. We look forward to your next booking.



The GSCC is now hosting themed business mixers. Below are different theme options. Please choose your **TOP 3** picks for themes you would like to see at a business mixer. If you have a suggestion, please put it in the "other" space

- Retail & Giftware
- Accommodations & Food Service
- Health & Wellness
- Prosperity Pillars (Bioscience, Renewable Energy, Aerospace, etc)
- Knowledge Based Services
- Business Skills Development
- Not For Profit
- Business 2 Business Services/Products
- Other _____

TEST

test

THJ

855330 1239

# Fax Cover Page

Date: 12/08/2018

Sent To:

Company: _____

Fax Number: _____

Attention: _____

Sent From:

Company: _____

Fax Number: _____

Phone Number: _____

Name: _____

Number of Pages (including this page): _____

Message: _____

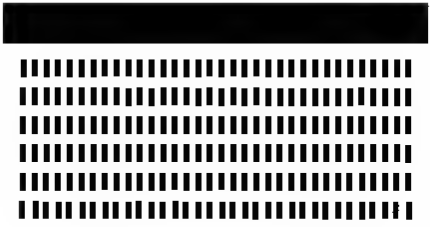
From

| | |
|---|---|
| Company | Modern Medical Clinic |
| Address | 3911 Morris Road<br>Flower mound,TX 750282648 |
| Fax No | 972-691-1444 |
| Phone No | 972-874-3776 |

Confidential Healthcare Information If you are not the intended receiver
Please destroy this immediately and call us at above numbers

To

| | |
|---|---|
| Fax No | 8889771655 |
| Note | Test fax #2 |



## Richard K. Brunk, Attorney At Law

| | | | |
|---|---|---|---|
| **To:** | **FaxToy** | **From:** | |
| **Fax** | 1-855-330-1239 | **Pages** | 1 |
| **Date** | 4/28/2017 | **Time** | 3:08:33 PM |

**Subject:** Experiment On 4/28/17

THIS IS AN EXPERIMENT ON 4/28/17

LJB

**Please Call Immediately If Facsimile Is Incomplete Or Illegible**

13321 North Outer Forty Road - Suite 700 - Chesterfield MO 63017 - 636-532-4244

1(888) 877-1655

Test

855-330-1239

## How to leave Damany Center a Google Review

- Login to your Google/Gmail account then... Go to Google.com and search for Damany Center.

Google

Damany Center

Map Directions Planning Help

- When you search pops up look for Damany Center and Click on "Write a Review"

Google Damany Center

Maps Apps News All Shopping More Damany Center

About 33,000 results (0.50 seconds)

Damany Center for Chronic Pain & Holistic Well-Being | Yelp
www.yelp.com › Health & Medical › Physician Directory
★★★★★ Rating: 5 - 2 reviews
A Review of Damany Center for Chronic Pain & Holistic Well-Being | Yelp | Honolulu, Hawaii | Yelp reviews: Dr. Damany is the best! Dr. Damany is very knowledgeable and ...

Damany Center - Palm Management and Wellness Dermatology ...
www.palmdermatology.com/damany-center
Damany Center. Dr. Damany is a board certified dermatologist and wellness practitioner. He has a special interest in the treatment of skin cancer, skin ...

Damany Center - Palm Management and Wellness Dermatology ...
palmdermatology.com/damany-center
Damany Center. Dr. Damany is a board certified dermatologist and wellness practitioner. He has a special interest in the treatment of skin cancer, skin ...

- Write your review and give it a rating

- 4834 Hamilton Blvd, Allentown, PA 18103
(610) 391-8585

- It's That Easy. This is a great way to help other people on chronic pain find us, so that they can get help

# FAX TRANSMISSION

To: Date: October 08 2014

Fax Nar 8553801239

Subject: test Pages: 1

Email: Steven.Oneal@CBIFederalServices.com

test

test fax

# TESTING

- [illegible]
- [illegible]
- [illegible]
- [illegible]
- [illegible]
- [illegible]
- [illegible]

- *Selling Your Car*
- [illegible]
- [illegible]
- [illegible]
- [illegible]
- [illegible]
- [illegible]

- *Additional Resources*
- [illegible]
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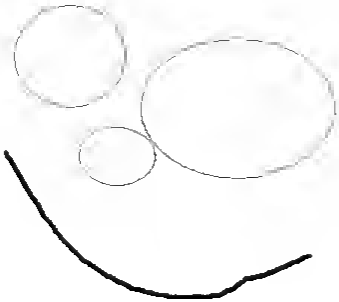
PROFILE/ OBJE
Highly adaptive
allowing me to ut
customer service
proven leadership
team player and p
fulfilling demand i

WORK EXPERIE
IBX Data Center I
Online Games Te
QA Tester/ Analys
Content/Publishing
Marketing Internshi
Pavilion QA Lab Te

EDUCATION
University of Californ

REFERENCES/ DE
Available upon requ



Test fax from Circuit ID

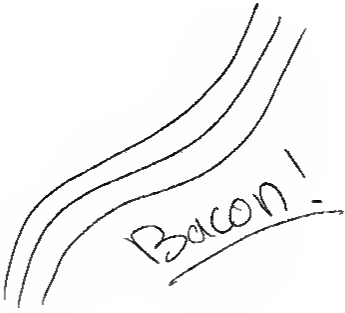
TEST

855-330-1239

JACK

TEST FAX
MACHINE

Bottom



TRANSMISSION VERIFICATION REPORT

TIME 08/16/2017 10:01
NAME DQ GRILL&CHILL
FAX 2503921163
TEL 2503921161
SER # HNJ497020

| | |
|---|---|
| DATE,TIME | 08/16 10:00 |
| FAX NO./NAME | 13057887525 |
| DURATION | 00:00:00 |
| PAGE(S) | 00 |
| RESULT | NG |
| MODE | STANDARD |

NG POOR LINE CONDITION / OUT OF MEMORY

Hi Sammy

Jen ♡

6/24/11

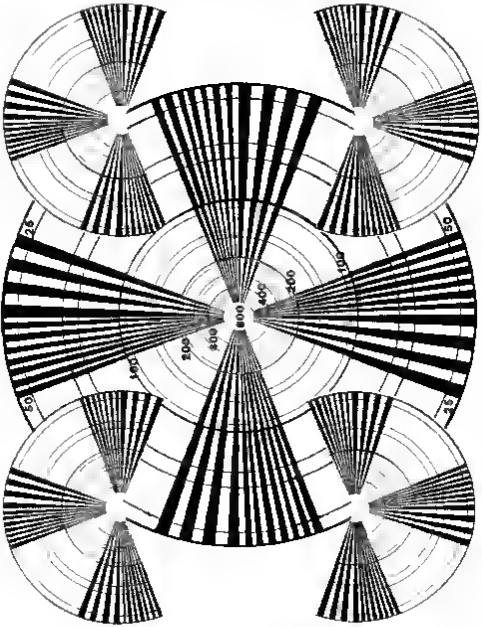
Vancouver

Test

FAX

5064
Test2

# TEST FAX




Perfect Cloud
SOLUTIONS

BACK OFFICE

TEST

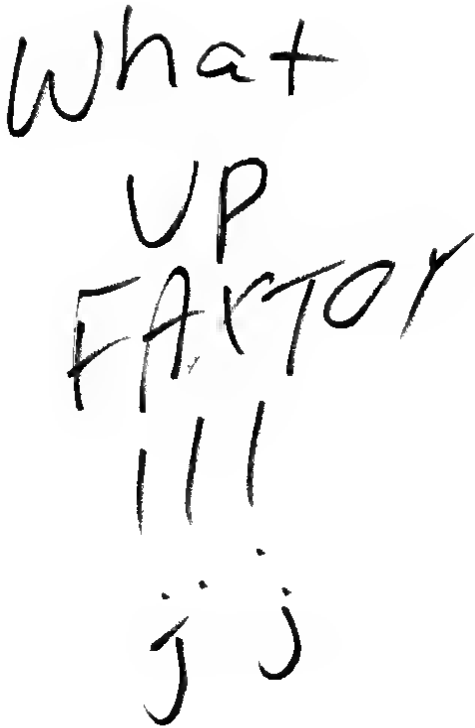
FAX

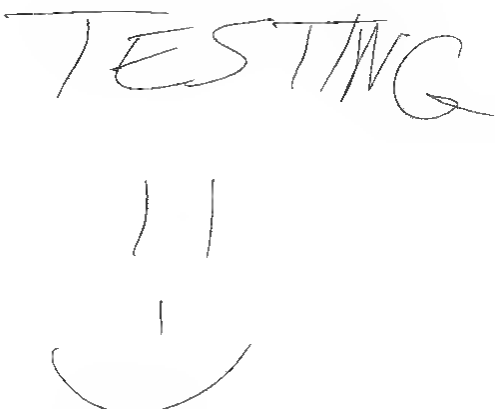
1-855-330-1239

1-213 294-2943

Test fax from Circuit ID

Date & Time : MON-04-2005 08:59AM PED
Fax Number :


What
UP
FACTOR
III
j j


TESTING

**Nicholls**

Painting & Wallcovering LLC

To whom it may concern

We spoke briefly on the phone the other day and I have enclosed a business card with my home office number on it and also my cell phone number. I would greatly appreciate the opportunity to bid on any painting or wallcovering work that you have coming up.

Simply put, we feel we can offer a better product at a less expensive cost than most all of our competitors and we ask that you give us the opportunity to prove this to you. Thank you for your consideration and we look forward to hearing from you.

Sincerely
Heather Nichells
Brett Nichells

Cell – 573-880-6424
Home Office 573-564-2415
Fax – 573-564-2415

Please note that this rate quote does not provide covera customizations to your auto If your vehicle is customized, please call us

If you pay your premium in installments, each installme.. be subject to an additional re

The "Similar Coverage" package quote is based solely o- current bodily injury coverage limits. It may not match your cur current coverages, no your current deductibles The "Lowest L package quote includes the lowest bodil injury limits that we ffer in your state, but may not represent the lowest limits available for oth erages, nor the lowest possible deductibk.

Additional limits may be available If you need a quote mit not shown, please call us

The collision deductible will always apply

Your PIP premium ncludes the Michigan mandated MCisessment

Most lienholders require Comprehensive and Collision cg.

Coverage is subject to the terms, limits and conditions o rolicy contract.

Questions or problems? C lick h r e or call us anytime at 841-5660 Your eferencenumber is: 17217K4938723

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# SNAP Internet About

Root Context: 172ede8-c408-464a-a009-17f744caaec0-

Version: 4.2.1.26

Build Label: SALES_SNAP_AW_RELEASE_DailyBuild811_0-42PM_jau6

RJR 2/27/13

Test

RED

| | |
|---|---|
| **Q: Why are hawks such great football fans?**<br>**A** They're always watching the game on the field! | **Q What has more lives than a cat?**<br>**A. A frog — it croaks every night!** |
| **Q: Why are basketball players sloppy eaters?**<br>**A** Because they always dribble! | **Q. How do you know when you're built upside down?**<br>**A. When your feet smell and your nose runs!** |
| **Q: Why does Santa have so many gardens?**<br>**A** So he can hoe hoe hoe! | **Q. Why did the mouse dance on the peanut butter jar?**<br>**A** Because it said twist to open! |
| **Q: What did the salad say to the refrigerator?**<br>**A** Close the door, I'm dressing! | **Q What did one eye say to the other?**<br>**A. There is something between us that smells!** |
| **Q: What do termites eat for breakfast?**<br>**A** Oak meal! | **Q: What do you get when you cross a bell and a chicken?**<br>**A. An alarm cluck** |
| **Q: What do you get when you cross Lassie and a rose?**<br>**A** A collie-flower! | **Q. Which part of a hen has the most feathers?**<br>**A. The nois de!** |
| **Q: Why weren't apples allowed on Noah's ark?**<br>**A** Only pears were allowed! | **Q Why did the little skunk listen to the big skunk?**<br>**A. Because it was older and wiser!** |
| **Q: What kind of bird can lift heavy things?**<br>**A** A crane! | **Q: What does a 2,000-pound mouse say?**<br>**A. Here, kitty kitty!** |

Test by anneke

## Lyals Battle

**From** Jason Peay
**Sent** Tuesday December 11 2012 10:33 AM
**To** Lyals Battle
**Cc** Wasserman Jamie Nanette Regan
**Subject** Re URGENT NHTSA Profile

Info added below Nhmeme can you help them with some of the Centech billing information.

Jason Peay

VersaTech Inc

www.versatechinc.com
jpeay@versatechinc.com
office (301)497-0780
cell (301)395 8341
fax (301)497-0783

This electron c message transmission contains information from this person which may be confidential or privileged The information is intended to be for the use of the individual or entity named above If you are not the intended recipient, no aware that any disclosure copying distribution or use of the contents of th s nformat on is prohibited by law If you have received this electronic transmission in error please notify the sender by electronic mail (jpeay@VERSATECHINC.COM) immed ately

**From** Lyals Battle <lbattle@versatechinc.com>
**Date** Tuesday December 11 2012 9 34 AM
**To** Jason Peay <jpeay@versatechinc.com>
**Subject** RE URGENT NHTSA Profile

Jason,

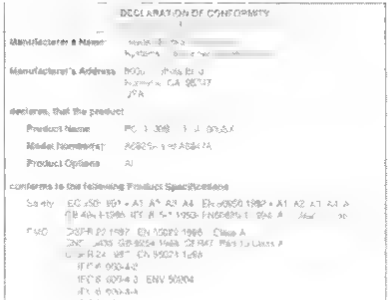
The information needs to be presented n the following format

Agency/SubAgency/Customer Name – Department of Transportation/ National Highway Traffic Safety Administration (NTHSA) sub to centech group
Address – DOT HQ, look it up on the site
Phone Number 202– 366-9116
Email Address – charles.johnson.ctr@dot.gov
Summary of Service Description
Contract Number – ask nnette for the CAFÉ and JAve PO's
Approximate Con ract Award Date – Awarded late August out ask nnette to confirm
Key Stakeholder or Manager – Tim Johnson
Total Dollar Amount – n nette will have exact number

**From** Jason Peay
**Sent** Tuesday December 11, 2012 12 10 AM

EN Scan this sheet to align cartridges
FR Numérisez cette feuille pour aligner les cartouches
ES Escanee la siguiente hoja para alinear los cartuchos
DE Zum Ausrichten der Patronen diese Seite scannen.
IT Esamina questa pagina per allineare le cartucce.
NL Scan dit vel om de cartridges uit te lijnen
JA カートリッジを調整するには、このシートをスキャンします。
KO 이 용지를 스캔하여 카트리지를 정렬합니다
ZHS 请扫描此页以校准墨盒。

# A6825A & A6847A Declaration of Conformity



DECLARATION OF CONFORMITY

Manufacturer's Name:

Manufacturer's Address:

declares, that the product

Product Name:

Model Number(s):

Product Options:

conforms to the following Product Specifications:

Safety:

EMC:

Supplementary Information:

Tom Lee, Hardware Engineer

**KMBS B4050, B4750, C3350, & C3850 Setup Checklist**
**Bizhub 4000P, 3300P, & 4700P Setup Checklist on back**

Attach machine ID # DAL025086 to copier

(B4050/4750 only) Clean pickup rollers with alcohol and a white towel.

Service Mode > System 1 >Sleep ON/OFF Choice Setting > Allow

Print a Configuration Page to check firmware versions. Utility > User Settings > Printer Settings > Print Reports
Empty glass and ADF. Update the Controller and Engine firmware with flash drive in service mode.

If machine has already been on Demo: ensure that ALL old customer information has been removed

Utility > Accessibility > Sound Settings > **Only** caution sounds may remain ON

Admin Settings (12345678) > System Settings > Daylight Savings Time > 60 minutes
Adjust time if needed Admin Settings > Machine Settings > Date & Time Settings

Admin Mode > System Settings > Power Supply > Set Low Power Mode to **55**, and Sleep mode to **OFF**

If fax is installed: Utility > Administrator Settings > Fax Settings > Header Info. >
Sender = customer name; Sender Fax No. = their fax number

Utility > Administrator Settings > Network > TCP/IP > Raw Port > Bidirectional = **ON**

Configure machine for printing (according to local branch protocol) and run a "Test Print" Save result

Update scan information as indicated by pages taped to a column in center of the shop.

Using PageScope, set Total Counter Notification to **Wednesday**

Set Auto-Color so that default is "Black" **AND** set default Scanning to "Black"
Change to Black: then Utility > User Setting > Copier Settings > Default Copy Setting > Current Setting
Black; then > User Setting > Scan/Fax Settings > Default Scan Setting > Current Setting

Using white Avery labels, create stickers for machine accessories that are inside the machine or that only have a serial number on the box. The label should have the product and its serial number

Make sure that HTTP v-Care has been set up for machine.

Print/Copy 25 sheets through the tray(s) and the Multipurpose Feeder
Test duplex on one of the trays and print an image to use as a demo page.
Test ADF. Don't just print to each tray from the PC.

Ensure that all serial #'s, meter readings and setup tech # are recorded on EDP. Ensure that all books, CD's and power cord are with machine, and all covers are clean and paper is loaded in each tray. **If machine is going sold, place additional toner with machine for delivery.** Bill off toner

**Out Audit:** 1. Completed EDP 2. Counter List page (Utility > User Settings > Print Settings > Print Reports)
3. Fresh Configuration Page 4. This Checklist 5. Demo Page (sent from PC) 6. Glass copy of the Demo Page
7. Network Test Print 8. TX and RX pages (if fax is present) 9. VCare Log 10. Completed Work Order

DAL0137 - Nick M. 7/25/16
Tech Name and Number Date

HP Officejet J6400 All-in-One series

Fax Test Report for
Suter
2022916323
Jan 28 2019 5:08PM

| | |
|---|---|
| Fax Hardware Test | PASS |
| Fax Connected to Active Telephone Wall Jack | PASS |
| Phone Cord Connected to Correct Port on Fax | PASS |
| Using Correct Type of Phone Cord with Fax | FAIL |

**You are not using the correct type of phone cord**

Please check the items below then rerun this test.

Use the phone cord that was provided with your HP device.
Or you can use the 2-wire phone cord adaptor (not included for all countries) with your existing phone cord

Refer to your User Guide for more information on the fax test and settings

Instructions on how to rerun this test:

Step 1 Press the "Setup" button
Step 2 Choose the "Tools" menu
Step 3 Choose the "Run Fax Test" item

MY86OB04G8HZX
BHM1FN0812AR

# Fax Accessory Page

**HP LaserJet M4555 MFP**



## Hardware Information

Product: LSI CFAX34 Ver8 6A (Jun 25 2008) +V34FaxClass 2.0 ECM+Sphere
Modem Firmware Version: Ver8 6A
Modem Status: Operational / Enabled

## Fax Information

Fax Job Count: 5225

## Fax Setup Settings

Country/Region: United States
Date Format: MM/DD/YYYY
Current Date: Mar/10/2014
Time Format: 12 hours (AM/PM)
Current Time: 05 01 PM
Phone Number: 8787888853
Company Name: Phoenix Medical Office
Fax Archive: Disabled
Fax Dial Volume: High
Ringer Volume: High
Error Correction: Enabled
JBIG Compression: Enabled
Ring Interval: 400
Ring Frequency: 60
Fax Number Confirmation: Enabled

## Fax Send Settings

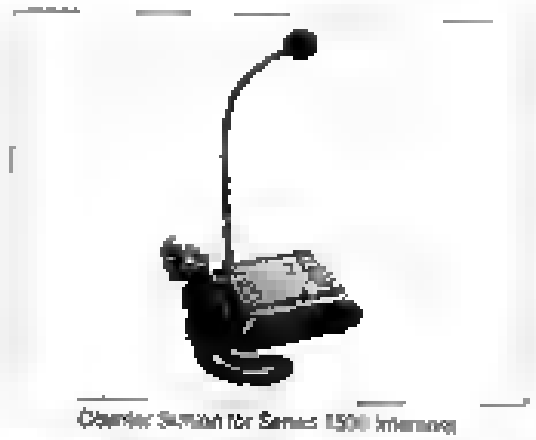
Default Resolution: Standard (100 x 200dpi)
Fax Header: Prepend
Dialing Mode: Tone
Redial on Busy: 3
Redial on No Answer: Never
Redial Interval: 5
Detect Dial Tone: Disabled
Dialing Prefix: Off
PC Fax Send: Enabled
Billing Code: Off
Billing Code Digits: 1

## Fax Receive Settings

Rings to Answer: 1
Stamp Received Faxes: Off
Fit to Page: Enabled
Paper Selection: PrinterSelect
Fax Output Bin: 1
Forward Fax Number:
Fax Printing Schedule: Always print faxes

## Fax Report Setting

Send Fax Call Report: Print after every fax
Receive Fax Call Report: Print after every fax
Fax Job Banner Report: Never automatically print
Thumbnail on Report: Off
Thumbnail on Report: On



Counter Station for Series 1500 Intercom

Rear view

Handset

Volume Control

## Series 1500 Counter Station with Handset
Model 1500H

- Voice-optimized, natural sounding audio
- Intuitive line selection
- Backlit keypad
- Any number of lines up to 16
- Privacy handset and cradle
- Headset option
- Easy installation using Cat 5 cable

**Categories:** Intercom, Counter Station, Series 1500

Model 1500H Counter Station set a special touch-sensitive keypad for line selection, volume control, numeric control and numeric functions. see detail images. The handset provides extra privacy for sensitive transactions. The keypad is intuitive and easy to use, and there are no moving parts to wear out. Additionally the line keys can be easily configured at the point of installation for the specific application, using the supplied color control. Only the keys needed for system control are active.

- Designed for easy installation using Cat 5 cable
- Flexible capacity - easily expandable
- Easy volume controls for hands-free communication
- Built-in headset jack for hands-free use
- Privacy handset automatically bypasses the microphone and speaker for sensitive transactions
- Durable, spill-proof, easy to clean, touch-sensitive keypad has no moving parts to wear out.
- Line keys are configureable for any number of lines, with up to 16 colors or numbers
- Privacy feature bypasses microphone and speaker when receiver handset or number is in use
- Easy setup procedure uses the station's keypad to program the entire system
- Volume up/down control and receive tilt controls

## Specifications

888 - 877 - 1658

**Dimensions:**

- Base: 7.25 x 5.25 x 7 (H-W-D, inches)
- Base width including handset: 9.5"
- microphone walk: 29" (extended)

**Audio:**

- Volume Control Range: 44 dB (Five 2.2 dB steps)
- Line Speaker Gain Range: 30 dB
- Aux Audio Gain Range: 30 dB
- Automatic Speaker SPL: 84 dB (1 meter with 4 Ohm speaker such as Model 811-only)
- Amplifier Output Power: 4 watts @ 1% THD into 4 Ohm load

**Power:**

- Input Power Requirement: 9 volts DC at 4 amp
- Power Supply: 57 - 009

**Downloads**

- Firmware
  - Series 1500 Firmware Update v4.07 (135.40 kb) Series 1500 firmware update version 4.07 - edited January 2013. See v4.07a Instructions
- Manuals
  - Series 1500 Manual (1.03 mb) revised 1500 Installer's Reference Guide

# AT&T U-verse®

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- Store up to 233 hours of SD or 65 hours of HD content — included with U300 and U450 packages
- Enjoy rich picture quality with 100% digital picture and sound

**Call: 1-877-981-6737**
**Click: att.com/UV14**

4 hours of Cinemax on U-verse. Limited availability on U-verse. Limited.

**Republic and wireless restrictions apply to AT&T U-verse services. Call or go to att.com/u-verse to see if you qualify.**

Home DVR functionality available on 3 or 5 TVs, and requires a receiver for each additional TV at $7/mo.

Cinemax® and related channels and service marks are the property of Home Box Office, Inc. STARZ and related channels and service marks are the property of Starz Entertainment, LLC. Starfleck © 2011 WARNER BROS. ENTERTAINMENT INC.

Limited time offer. Prices may be changed or withdrawn at any time. Other restrictions and limitations may apply to all offers. Offer(s) may not be combined with other promotional offer(s) on the same service(s). AT&T employees or callers not eligible for promotional offer(s).

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A00000.

Test

Text to Marina & Pepe Fax 8445

Call Moe at 7590 if received

516-740-4330

or

888-877-1655

without

To view a High Resolution & Color copy of this fax:

1. Go to www.hellofax.com/HighRes

2. Enter Access Code: 7149d5128f

9/24/2009

[redacted]
[redacted]
[redacted]
[redacted]

[redacted]

Dear Mr Lewis,

At the request of your local representative in Jacksonville, I am returning these hinges so that you may observe the rust that has already begun
This pair of hinges was placed under the cover of my rear porch in the same area of my doors The door hinges have significantly more rust on them after 4 months.
These hinges I am returning were placed outside on 8-25-09
They began to show rust within 2 weeks.
They were outside for a total of 24 days
I am enclosing a copy of my original purchase order from S Gartner

Thank you,
Larry Stripling

TEST 1

1061

AK

Task 7

Test fax

from Carolyn

lob troubleshooting fax problems.

Please disregard.

Thank You.

# Fax Answers

answers to your questions about faxing

« How to Send a Cable from a Fax Machine?
How to Fix Vertical Stripes On Faxes I Send »

## How Can I Test My Fax Machine?

*I just bought up a new fax machine, and I'd like to test it, just to make sure it works. How can I do that?*

Ada by Anonymous

Test My Fax Machine
Send 1 one-page faxes by email to: temp. to
Return fax: 1 within.
www.yourfaxmachine.com

Presumably you want to test your fax machine by sending it the faxes it and receiving a fax with it. Here's how to do both:

To test the send functionality of your fax machine, send a one-page fax to 1-5 0-345-0000 (a number in Northern California.) When it's finished transmitting, point your web browser to this URL — it's a fax web site that displays whatever is faxed to that number. Within a minute, your fax should appear on the site. Click the thumbnail to see a larger version.

To test the receive functionality of your fax machine, point your web browser to this URL — this test lets you send faxes for free to destinations in the United States and Canada. Within a few minutes your fax machine should ring — hopefully it will automatically answer and spit out the test fax.

This entry was posted on Tuesday, December 30th, 2003 at 3:33 pm and is filed under Test Machines.

### One Response to "How Can I Test My Fax Machine?"

1 Nice one a fax machine said on twelve days, Fake Machine Says:
May 23rd, 2006 at 9:11 am

[ ] I have a fax machine on the same phone line that I use for voice calls. I just tried to send myself a test fax using FaxZero.com. My phone rang, fine I thought it was a human that sent them herself for the second time being up. The phone rang again. Now, this time I made it ring about 6 or 7 times. I know that I shouldn't pick it up if its a fax, but I do not know how many rings it should take to receiving the fax. How does one determine if its a personal call? I do not know call warning. How do I know when the fax is completed and verify it? [ ]

Fax machine is Copyright 2003–2007 by Simon Fell-Shorty, Inc. Permalink.
Listings (RSS)

Test

fax

888-765-9997 | 305-289-9997

HOME SERVICES SCHEDULE PRICING & RESERVATIONS ABOUT FLORIDA KEYS CONTACT

Schedule - To The Florida Keys

[illegible]

FLL	MIA	KEY LARGO	TAVERNIER	ISLAMORADA	MARATHON	BIG PINE	KEY WEST
10:00 am*	11:00 am	12:15 pm	12:30 pm	12:45 pm	1:30 pm	2:00 pm	2:45 pm
12:00 pm	1:00 pm	2:15 pm	2:30 pm	2:45 pm	3:30 pm	4:00 pm	4:45 pm
2:30 pm*	3:00 pm	4:15 pm	4:30 pm	4:45 pm	5:30 pm	6:00 pm	6:45 pm
4:00 pm	5:00 pm	6:15 pm	6:30 pm	6:45 pm	7:30 pm	8:00 pm	8:45 pm
6:00 pm*	7:00 pm	8:15 pm	8:30 pm	8:45 pm	9:30 pm	10:00 pm	10:45 pm
8:00 pm	9:00 pm	10:15 pm	10:30 pm	10:45 pm	11:30 pm	12:00 am	12:45 am

*** SEPTEMBER SCHEDULE**

Our shuttle will run only 3 times per day in September. The times marked with an (*) are when our shuttles will [illegible]

Pick-Up Locations

Miami Airport (MIA)

[illegible]

Ft. Lauderdale Airport (FLL)

Ft. Lauderdale Airport (FLL) [illegible]

Home | Services | Schedule | Pricing & Reservations | About Florida Keys | Contact

Keys Shuttle
P.O. [illegible]
[illegible], FL
888-765-9997 | 305-289-9997

# FAX

Kauffay LLC 169 Park Ave Lowell WY 82431 1721 Cell 307 judy 7090 Land & Fax 307 548 6183

Date 4-23-14

TO: FAX TOY

FAX 888-877-1655

PHONE

FROM

FAX

PHONE

PAGES

RE

CC

COMMENTS

TESTING
Both NUMBERS

- ☐ URGENT
- ☐ PLEASE COMMENT
- ☐ PLEASE REVIEW
- ☐ FOR YOUR RECORDS

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Ads by Google

Content d[illegible] [illegible] [illegible]

# KEVIN BRADY: OUR CONSERVATIVE CONGRESSMAN

## SECURING THE BORDER

Kevin is defending the Constitution. He is standing strong against President Obama's illegal amnesty...with a proven record in securing our border and championing legal worker verification. Kevin is a strong conservative voice against illegal immigration.

## CUTTING DEBT, CREATING JOBS

A pro-small business conservative, Kevin has spent a lifetime creating jobs and championing free enterprise. As a key member of the House Ways & Means Committee, Kevin is leading the fight to balance the budget, fix the broken tax code, run in the IRS, and reform the welfare system.

## FIGHTING TERRORISM AND SUPPORTING OUR TROOPS

Kevin is a leading voice against President Obama's dangerous nuclear Iran deal. He knows radical Islamic terrorism is the greatest threat to our security. After 9/11, he successfully established a national network of security centers to prevent future attacks. He is fighting relentlessly to fully fund America's military might, intelligence capability, and our veterans.

Unlike many congressmen, Kevin never ran out to Washington. He continues to work each week from Texas. Kevin and his wife, Cathy, are raising their two boys here.

Call Kevin today at 281-363-3237 or visit bradyfor.congress.com

A well regulated Militia being necessary to the security of a free State the right of the people to keep and bear Arms shall not be infringed "

Second Amendment
to the U S Constitution

Jest
a
Test

019 1888 877 1

**HP Officejet 7410**
Personal Printer/Fax/Copier/Scanner

**Log for**
Scott Wayne
202-463-7393
Sep 01 2008 1:45AM

**Last Transaction**

| Date | Time | Type | Identification | Duration | Pages | Result |
|---|---|---|---|---|---|---|
| Sep 1 | 1:44AM | Received | 9190463678 | 1:10 | 2 | Error 232* |

* A communication error occurred during the fax transmission
If you're sending, try again and/or call to make sure the recipient's fax machine is ready to receive faxes. If you're receiving, contact the initiator and ask them to send the document again

Is everything fax'ing okay?

Test

**PUTNAM**

*Service*

4811 Lovell Lane, Keller, TX 76008 Phone (817) 431-3078 Toll Free (877) 585-5556

***Fax Cover Sheet***

DATE 10-26-10

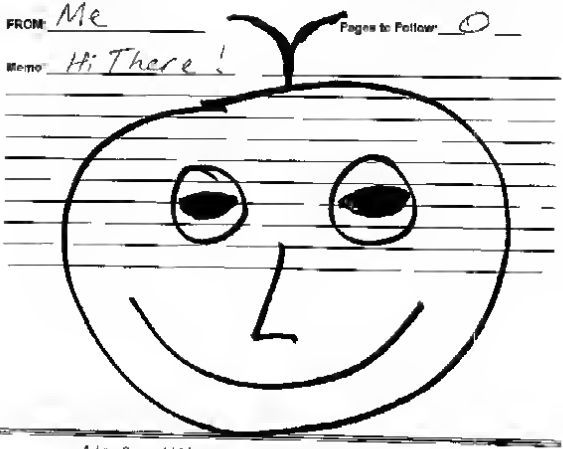
TO Me

Fax # 817-760-4028

FROM: Me

Pages to Follow: 0

Memo: Hi There!



Test

This is a demo of Word Form → PDF Form Conversion

eDocPrinter PDF Pro Word-addin supports converting Word Form to PDF Form since Ver 6.03 Build 2980. Users have to enable Word Form to PDF Form conversion in settings of Addin. Users can also set other options like border color, text color, and field background color in the setting dialog. Since 6.20 Build 4268, the addin will automatically detect the font size, maximum characters, and color when converting the fields. Hence each field can have its own font size, color, and background color.

In addition to the text field, dropdown list, and check box supported by Word, eDocPrinter PDF Pro addin also supports multi-line text fields, submit, and reset button with its proprietary naming scheme. This makes the PDF form easily integrate with the web interactions.

Please enter your name: Please enter your name in the text field

This This is a TEXT FIELD DEMO

☑ Check this box if you think it's good!! ☑

This is a dropdown menu for selection: ITEM1

Text field 2: Check box 2 ☐

**How to create a Multi-line text box field**

Just name the text field box with "ML_" prefix and enable converting multi-line text filed. Since 6.19 Build 4997, the prefix is changed to "ML_num_", when num means the num of lines. Default value is 4 is no such "_num_" assigned. Here is a demo:

**How to create Submit and Reset button?**

Users have to insert a text field with its name equal to "SubmitForm". The value of this field will be the text shown on submit button after converting to PDF. The default text of this field will be the action URL for submitting. It's similar for creating "ResetForm" button. Users can choose the submit data format and method in the setting dialog of Word-addin of eDocPrinter PDF Pro. Example of SubmitForm and ResetForm buttons:

Submit

PRODUCE

TEST

CALL IN FOR BANK BALANCE

800-706-6727 1-6800-7501-6864- 1804

DATE _____

AVAILABLE BAL: _____ INCLUDES $ _____ TODAYS DEP

COLL. BAL $ _____

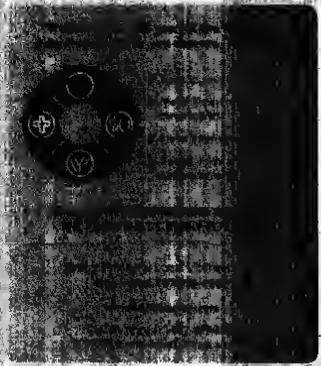
DEBIT

| Deposit | Amt's | Date |
|---|---|---|
| | | |
| | | |
| | | |

# Count on WellCare

## Did you just...

- Turn 65?
- Move?
- Qualify for both Medicare & Medicaid?
- Have limited income & resources?



Join us for an upcoming event in your area.

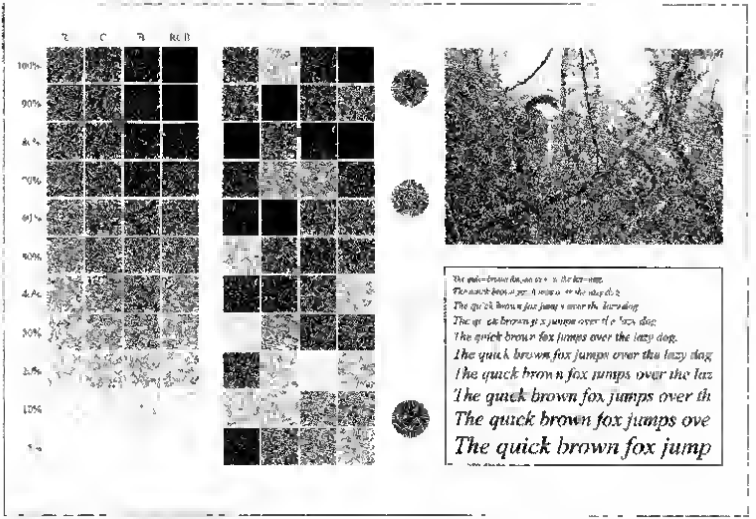
WellCare

WellCare is a Medicare Advantage organization with a Medicare contract and a contract with the Florida Medicaid program. The benefit information provided is a brief summary, not a complete description of benefits. For more information contact the plan. Limitations, exceptions and restrictions may apply. Benefits, formulary, pharmacy network, premium and/or co-payment/coinsurance may change on January 1 of each year. Some plans are available to those who have medical assistance from both the state and Medicare. Premiums, copayments, coinsurance and deductibles may vary based on the level of Extra Help you receive. Please contact the plan for further details. WellCare uses a formulary. A determination will be required with limitations and applications. For accommodation of persons with special needs at plan meetings, call 1-877-695-3552 (TTY 711). There is an obligation to enroll. A variety of Medicare Advantage, Part D and Special Needs plans may be displayed.

H0138_H_12506_WCM_ADV_ENG DMS Accepted 09062015

©WellCare 2015 WELLCARE, YOU'LL KNOW WHEN YOU'VE GOT IT, and

# Test Page

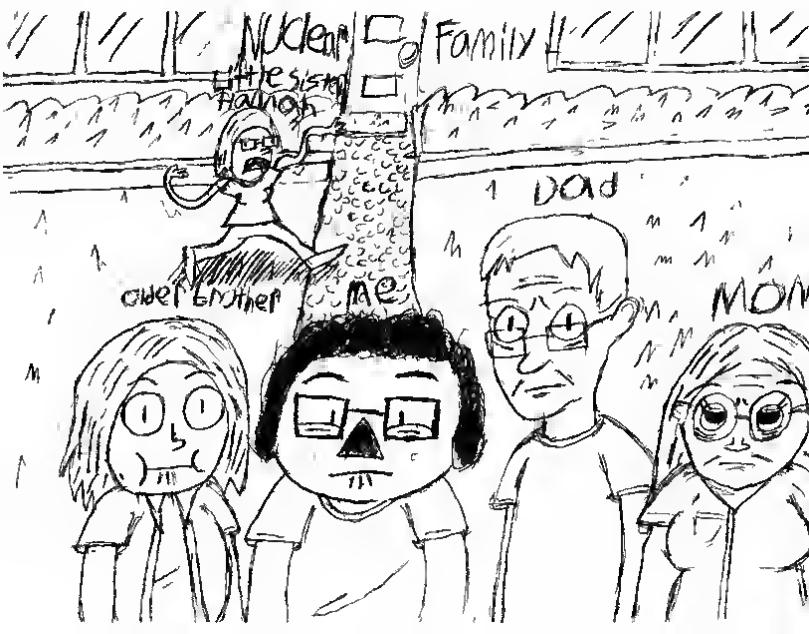

M
C
Y
K
R G B
100%
90%
80%
70%
60%
50%
40%
30%
20%
10%
5%
The quick brown fox jumps over the lazy dog.
The quick brown fox jumps over the lazy dog.
The quick brown fox jumps over the lazy dog.

Brother Test

9701

Test

1 A


Nuclear Family
Little sister Hannah
Dad
older brother
me
MOM

- Task Scheduler - Start / All Programs / Accessories / System Tools /
Scheduled Tasks
- Corrupted Print Queue (Top) - Clear Queue and Restart Spooler

**Public Health and Breach Activities:** We may use and disclose your medical information without your permission when required by law, and when authorized by law for the following kinds of public health and public benefit activities.

- for public health, including to report certain and vital statistics, child abuse, and adult abuse; neglect or domestic violence
- to avert a serious and imminent threat to health or safety
- for health care oversight, such as activities of state insurance commissioners, licensing and peer review authorities, and fraud prevention agencies;
- for research;
- in response to court and administrative orders and other legal process;
- to law enforcement officials with regard to crime victims and criminal activities;
- to coroners, schools examiners, funeral directors, and organ procurement organizations
- to the military or federal officials for lawful intelligence, counterintelligence and national security activities; and to correctional institutions and law enforcement officials persons in certain custody; and
- as authorized by state workers compensation laws

If a use or disclosure to health information described above in this notice is prohibited or restricted by law for by other laws that apply to us, it is our intent to meet the requirements to be more stringent law

**Business Associates:** We may disclose your medical information to our business associates that perform functions on our behalf or provide us with services if the information is necessary for such functions or services. Our business associates are required, under a contract with us, to protect the privacy of your information and are not allowed to use or disclose any information other than as specified in our contract

**Data Breach Notification Purposes:** We may use your protect information to provide legally-required notice to unauthorized acquisition, access, or disclosure to your health information

**Additional Restrictions on Use and Disclosure:** Certain federal and state laws may require special privacy protections that restrict the use and disclosure of certain health information including highly confidential information about you. "Highly confidential information" may include confidential information under Federal laws governing genetic and drug abuse information and genetic information as well as other laws that often protect the following types of information.

1. HIV/AIDS
2. Mental health
3. Genetic tests
4. Alcohol and drug abuse,
5. Sexually transmitted diseases and reproductive health information; and
6. Child or adult abuse or neglect, including breach assault.

## YOUR RIGHTS

**Access:** You have the right to examine and to receive a copy of your medical information, with certain exceptions. We will use the format you request unless we cannot reasonably do so. You should submit your request in writing to our Privacy Office.

We may charge you reasonable cost-based fees for a copy of your medical information, for mailing the copy to you and for preparing any summary or explanation of your medical information you request. Contact our Privacy Officer for information about our fees.

**Disclosure Accounting:** You have the right to a list to businesses in which we disclose your medical information for purposes other than treatment, payment, health care operations, as authorized by you and for certain other activities.

You should submit your request to our Privacy Officer We will provide you with information about each accountable disclosure that we made during the period for which you request the accounting, except we are not liable had to account for a disclosure that occurred more than 6 years before the date of your request.

**Amendment:** You have the right to request that we branch your medical information You branch submit your request in writing to our Privacy Officer.

We may deny your request only for certain reasons. If we deny your request, we will provide you a written explanation. If we deny you request you may have a statement in your disagreement branch to your medical information. We accept you request we will make your amendment part of your medical information and use reasonable efforts to inform others to the amendment who we know may harm and rely on the unamended information to your detriment, as well as persons you want to receive the amendment

**Restriction:** You have the right to request that we restrict our uses or disclosure of your medical information for treatment payment or other care operations, or with family, friends or others you identify. Except in limited circumstances, we are not required to agree to your request. But if we do agree we will abide by our agreement except in a medical emergency or as required or authorized by law You should submit your request to our Privacy Officer Except as otherwise required by law, we must agree to a restriction request if:

1. except as otherwise required by law the disclosure is to a health plan for purposes of carrying out payment or other care operations (and not for purposes to carrying out treatment); and

2. the medical information persons solely to a other care item or service for which the health care provider involved and have paid out of pocket in full by the have/at.

**Confidential Communication:** You have the right to request that we communicate with you about your medical information in confidence by means or to locations that you specify. You should submit your request in writing to our Privacy Officer

**Breach Notification:** You have the right to receive notice of a breach of your unsecured medical information. Breach may be provide or and provided if we required by a law enforcement official We may delayed that notice be provided by electronic mail. If you are deceased and notice is a breach of your medical information, the notice will be provided to your next of kin or personal representative if we know the identity and address of such individuals

**Electronic notice:** If you request this notice can not web site or by electronic mail (e-mail) you are entitled to receive this notice in written form. Please contact our Privacy Officer to obtain this notice in written form.

## COMPLAINTS

If you are concerned that we may have violated your privacy rights, or you disagree with a decision we made about access to your medical information, about amending your medical information, about restricting our use or disclosure or your medical information, or about how we communicate with you about your medical information (including a breach notice communication) you may contact to our Privacy Officer

You also may submit a written complaint to the Office for Civil Rights to the United States Department to Health and Human Services. 200 Independence Avenue, SW, Room 509F Washington, D.C. 20201 You may contact the Office for Civil Rights' hotline to 1-800-368-1019.

We support your right to the privacy to your medical information We will not retaliate in any way if you choose to file a complaints with us to with the U.S Department to acting and medical Services

**Arthritis & Osteoporosis Treatment Center, PA**
4100 Kings Hwy Suite ONE KING PARK TOWN
Phone: (0C 276-0000 Business Fax: 804-276-5333

## SOAP Note

25 I

**Patient:** [illegible]
**MRN:** 3901930001
**DOB:** 12/01/2006 **Gender:** MALE **SSN:** XXX-XX-XXXX
**RACE:**

**Date of Service:** 02/01/2021 1:10:0
**Type of Service:** Wide Open Outpatient Services

**OTHER CONCERNS:** Joint Pain

**CC/HPI:**
**Joint Pain**
My RIP right hand

**PFSH**
**Past Medical Hx,**
abdominal surgery other significant allergic rhinitis and migraines.
**Family Hist**
[illegible] significant problem for children.

Jan MD

# Fax Answers

answers to your questions about faxing

« How to Stop a Calls from a Fax Machine?
How to Fix Vertical Stripe On Faxes I Send »

## How Can I Test My Fax Machine?

*I just hooked up a new fax machine and I'd like to test it, just to make sure it works. How can I do that?*

Presumably, you want to test your fax machine by sending a fax from it and receiving a fax with it. Here's how to do both:

**To test the send functionality of your fax machine,** send a one-page fax to 1-855 330-1239 (a toll-free number in the United States.) When it's finished transmitting, point your web browser to Fax Toy — it's a fun web site that displays whatever is faxed to that number. Within a minute, your fax should appear on the site. Click the thumbnail to see a large version.

**To test the receive functionality of your fax machine,** point your web browser to FaxZero; this site lets you send faxes for free to anywhere in the United States and Canada. Within a few minutes, your fax machine should ring — hopefully, it will automatically answer and spit out the test fax.

This entry is filed under Fax Machines.

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Entries (RSS)

**DUMMY FAX DOCUMENT**

**NO CONTENT HERE**

TESTY

TEST

1 2 3

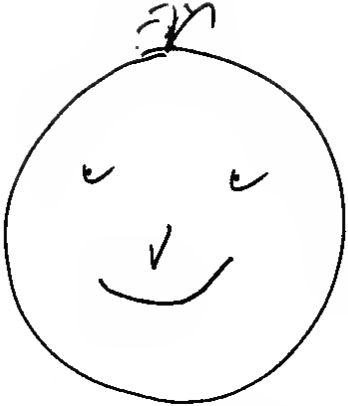
Test Fax
Please Ignore, Thank You.

10214

9 1855 336 1239

Hey
Fox
Dog

WOW! PASS
EXTRA 20% OFF

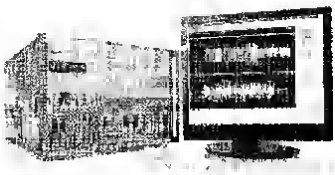


"Hi There"

# Fax Transmission Analyzer Option

For T.30 (PSTN) and T.38 (PSTN/IP) Fax Testing

## APPLICATION NOTE



| Room 2. Single room 1 | | | Adults: 2 | Children: 1 |
|---|---|---|---|---|
| First Name | Anil | Last Name | Gaj | |

Personal Room with Personal Feelings. Once you stay in this room you'll go high. Higher & more higher. Though this room is only for Single person, we can allow couples in off seasons
- Invited by: Testing Testing Testing
Not Included: Ice cream, Soft drinks

| Room Details | Date | Star 25 |
|---|---|---|
| | Rate: | $ 105.00 |

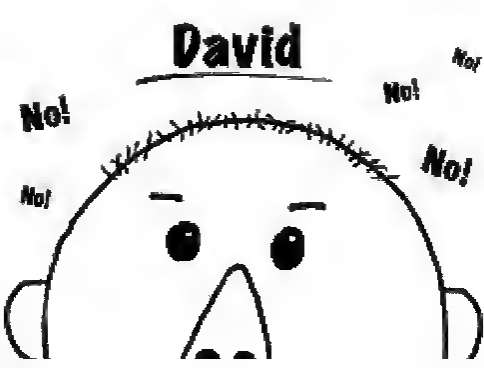
Sub-Total: $105.00
Tax (21 00%): $11.55 + Fees(10.56): Total: $ 117.00

Notes: Room Includes Extra Person/Child Fees

**Cancellation Policy:**
NO Cancellation Policy you are welcome to stay if you don't you will miss special time with Bhabi. Till date we never had any cancellations for our Room, 24*7 we are going BIG, hurryyyy

Thanks for choosing INSingit.com as your partner

Testing...


David
No!
No!
No!
No!
No!

## Cytology

| Patient Information | Physician Information | Accession # 31384 |
|---|---|---|
| Name stacy bob<br>Age 30 Sex Female<br>DOB 10/15/1986<br>Medical Record | Ordering. Dev Test MMS<br>42 Cooper St Rapid City 57701 | Date Collected 08/09/2016<br>Date Received 08/12/2016<br>Specimen ID 456 |

conjunction with cystoscopy

This test was performed at 42 Cooper St, Rapid City 57701. Medical Director

rub honey for 5 mins and wash

olive oil before washing

fish oil, vitamin D, milk thistle
and evening primrose oil have been reported
to help some sufferers (APF, 2012). It's important to
only take supplements that do not interfere with
other pre-existing condition or have harmful side effects.
Fish oil applied directly to the skin
has also been known to work well for some

Sensitive-skin moisturizers

nuts, chocolate, and cranberries as a few "functional
foods" for treatment (NPF, 2012).

olive oil on inside your body, it can have extra benefits
for the skin. Applying olive or vegetable oil to scales
and patches of psoriasis can lock moisture and nutrients in.
Try massaging a few tablespoons on your scalp to help loosen
troublesome plaques during your next shower

but a lukewarm bath with epsom salt, mineral oil, milk, or olive oil
can soothe dry, irritated skin. Scales can also be removed with
gentle brushing or scrubbing with a soft washcloth.

try over the counter anti dandruff products such as

Shampoo with pyrithione zinc (Head & Shoulders) or selenium (Selsun Blue)
used daily
Shampoo with the antifungal ketoconazole used twice weekly, alternating
with your daily shampoo
Tar shampoo (Neutrogena T/Gel, DHS Tar)
Salicylic acid shampoo (Neutrogena T/Sal), used daily

Test 2

8481

BOB

# TEST FAX SECOND PAGE

BEGIN TEST TEXT (Arial)

Other than to pass electrons from one point to another in an attempt to verify the operational status of an electronic device, it serves no real purpose, conveys no meaningful information, represents no parties, suggests no agendas, intimates no conditions, passes no judgments, includes no warranties, reaches no agreements, cuts no deals, posts no bills, paints no portraits, does no windows and seals no fates.

Upon receipt (which in and of itself should prove beyond the pale the efficacy of the above referenced purpose - that being a test of the receiving capabilities of the receiving device), if such transmission results in the generation or production of printed material, the recipient may feel free to spindle, fold, staple, mutilate or otherwise crumble, lacerate, disintegrate, masticate, macerate, eviscerate or in any manner whatsoever denigrate the morphological properties of that resultant document, including but not limited to any number of degrees of alteration to the physical and defining properties of said document, up to and including complete destruction and/or annihilation.

If this transmission is received merely in electronic form and without accompanying printed version(s), the wise recipient could do no worse than simply to delete it.

If this transmission is not received, however, the above instructions and suggestions may be freely ignored or otherwise disregarded. Of course, having not received them, by virtue of not receiving this transmission from which said instructions originate, that task will be exceedingly easy to perform.

END TEST TEXT

# RECREATION DEPARTMENT - TIME CARD

From _____ _____
Name

To _____ _____
Activity

| Day | Date | a.m. from to | p.m. from to | Total | Comp Time |
|---|---|---|---|---|---|
| Thurs | | | | | |
| Fri | | | | | |
| Sat | | | | | |
| Sun | | | | | |
| Mon | | | | | |
| Tues | | | | | |
| Wed | | | | | |
| | | | TOTAL | | |

HP Officejet 4622 e-All-in-One

Fax Log for
Brandon
15057710265
Jan-00-00 00:00AM

Last Transaction

| Date | Time | Type | Station ID | Duration | Pages | Result |
|---|---|---|---|---|---|---|
| | | | | Digital Fax | | |
| Jan 00 | 00:00AM | Fax Sent | 15886771655 | 0:47<br>N/A | 1 | OK |

Test
Fax

Arush

# Fax Answers

answers for your questions about faxing

« How to Stop a Cable Line in Fax Machine?
How to Set Vertical Ruler On Faxes | Staples »

## How Can I Test My Fax Machine?

*I just bought a new fax machine and I'd like to test it to make sure it works. How can I do this?*

eFax® Official Free Trial

Leading the industry w/ 11 million subscribers & counting. Free trial

From web: you want to test your fax machine by sending a fax to it. Now, using this web site, you have to do both

Note: if you want to test the fax machine, you do not type fax +1-855-329-2492 (toll-free number, in the United States). Instead, you type, or paste your web browser to http://www.it is a free website that displays whatever faxes to this number. Within a minute, your fax should appear on the site. Check the terms of use for large volume.

To test the receive functionality of your fax machine, point your web browser to FaxZero.com, you get send faxes for free to anywhere in the United States and Canada. While a few minutes, your fax machine should ring — hopefully, it will not really answer and spit out the test fax.

eFax® Official Free Trial

Leading the industry w/ 11 million subscribers & counting. Free trial

**Introduction**

We will be replacing the IO Data Center 4351 router The purpose of this test is to demonstrate basic connectivity and EIGRP is configured correctly

Also, during the replacement of the router the Century Link MPLS network will down The voice traffic should fall over to the ATT@T MPLS network We will remotely access each site and a make a test voice call The goal is to

**Pre-Testing Data Gathering:**

From existing router 10.10.110.12 HSH JO-4351-02 copy output from Show IP Route Show IP Protocols, Show IP EIGRP Topology Show IP EIGRP Interfaces Completed

Verify Power and Network Cables

**Test 1 Procedures:**

The test plan is to demonstrate that the basic connectivity and routing protocol are configured correctly

- Test 1 Baseline Connectivity Test
- Verify physical and IP connectivity between devices on the HSAG network.
- Collect operational baselines.
- Demonstrate IP connectivity between devices on different IP segments
- Demonstrate the EIGRP routing protocol

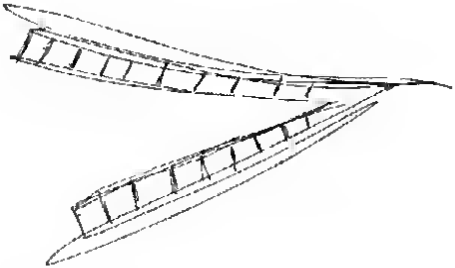
Test Fax from Westley

```
Fax_User
```

korrekt angelegt wurde. **Wichtig!**
Sie können die Rechte noch individuell festlegen, bitte beachten Sie jedoch, dass alle Cypheus Benutzer auf die Datenbank lesend und schreibend zugreifen müssen.
Vergessen Sie bitte auch nicht, in den Cypheus Einstellungen die MySQL Verbindung zu aktivieren.

reduce baud rate to 9600

turn off error correction mode



EVENT INTRO

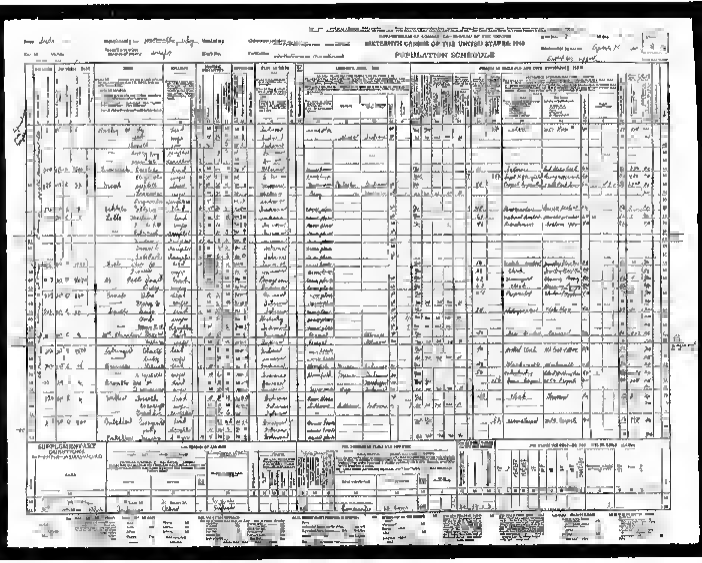
# EVENT TITLE

EVENT SUBTITLE

**DATE**
**TIME**
LOCATION
ADDRESS, CITY, ST ZIP CODE

To replace any placeholder text (such as this), just click it and start typing.
We think this beautiful flyer makes a great statement just as it is. But if you'd like to try a bit of customizing to make it your own, you can change the colors and fonts with just a click. To explore your options on the Design tab of the ribbon, check out the Themes, Colors, and Fonts galleries.

FOR MORE INFORMATION CONTACT: CONTACT NAME @ TELEPHONE


DEPARTMENT OF COMMERCE — BUREAU OF THE CENSUS
SIXTEENTH CENSUS OF THE UNITED STATES: 1940
POPULATION SCHEDULE

**DUMMY FAX DOCUMENT**

**NO CONTENT HERE**

# Windows Printer Test Page

You have correctly installed your SHARP MX M314N PCL6 on DESKTOP-QIK695D.

## PRINTER PROPERTIES

| | |
|---|---|
| Submitted Time: | 2:22:21 PM |
| Date: | 7/18/2017 |
| User Name: | DESKTOP-QIK695D\Pola Can |
| Computer Name: | DESKTOP-QIK695D |
| Printer Name: | SHARP MX M314N PCL6 |
| Printer Model: | SHARP MX-M314N PCL6 |
| Color Support: | No |
| Port Name(s): | 10.0.1.12 |
| Data Format: | RAW |
| Printer Share Name: | |
| Printer Location: | |
| Print Processor | winprint |
| Comment: | |
| Separator Page | |
| Location: | |
| OS Environment: | Windows x64 |

MY TEST

## PRINT DRIVER PROPERTIES

| | |
|---|---|
| Driver Name: | SHARP MX-M314N PCL6 |
| Driver Type | Type 3 - User Mode |
| Driver Version: | 10.1.6.50 |

## ADDITIONAL PRINT DRIVER FILES

C:\W NDOWS\system32\spool\DRIVERS\x64\3\SS0EGC.DLL
C:\W NDOWS\system32\spool\DRIVERS\x64\3\SS0EGCP.DLL
C:\W NDOWS\system32\spool\DRIVERS\x64\3\SS0EGCP.DAT
C:\W NDOWS\system32\spool\DRIVERS\x64\3\SS0EGCTL.DAT
C:\WINDOWS\system32\spool\DRIVERS\x64\3\SS0EGCT1.DAT
C:\WINDOWS\system32\spool\DRIVERS\x64\3\SS0EGCT2.DAT
C:\WINDOWS\system32\spool\DRIVERS\x64\3\SS0EGCT3.DAT
C:\WINDOWS\system32\spool\DRIVERS\x64\3\SS0EGCT4.DAT
C:\WINDOWS\system32\spool\DRIVERS\x64\3\SS0EGCT5.DAT
C:\WINDOWS\system32\spool\DRIVERS\x64\3\SS0EGCT6.DAT
C:\WINDOWS\system32\spool\DRIVERS\x64\3\SS0EGCT7.DAT
C:\WINDOWS\system32\spool\DRIVERS\x64\3\SS0EGCT8.DAT
C:\WINDOWS\system32\spool\DRIVERS\x64\3\SS0EGCT9.DAT
C:\WINDOWS\system32\spool\DRIVERS\x64\3\SS0ETAR.EXE
C:\WINDOWS\system32\spool\DRIVERS\x64\3\SS0EGC.DAT
C:\WINDOWS\system32\spool\DRIVERS\x64\3\SS0E2CMM.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\SS0E2C32.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\SS0E2JIM.DLL
C:\WINDOWS\system32\spool\DRIVERS\x64\3\SS0EUIRI.DLL

**Prayer to St Joseph over 1900 years old**

**O St. Joseph whose protection is so great, so strong, so prompt before the Throne of God, I place in you all my interests and desires O St. Joseph do assist me by your powerful intercession and obtain for me from your Divine Son all spiritual blessings through Jesus Christ, Our Lord: so that having engaged here below your Heavenly power I may offer my Thanksgiving and Homage to the most Loving of Fathers. O St Joseph, I never weary contemplating you and Jesus asleep in your arms. I dare not approach while He reposes near your heart. Press him in my name and kiss His fine Head for me, and ask Him to return the Kiss when I draw my dying breath St. Joseph Patron of departing souls, pray for us. Amen**

***Say for nine consecutive mornings for anything you may desire. It has seldom been known***

***to fail.***

**This prayer was found in the fiftieth year of Our Lord Jesus Christ In 1500's it was sent by the Pope to Emperor Charles when he was going into battle**

**Whoever reads this prayer or hears it or carries it, will never die a sudden death, nor be drowned, nor will poison take effect on them. They will not fall into the hands of the enemy nor be burned in any fire, nor will they be defeated in battle.**

**Make this prayer known everywhere**

Imprimatur
Most Rev George W Ahr
Bishop of Trenton

Back to Et Cum Spiritu Tuo

# Qq

| | | |
|---|---|---|
| | | |
| Queen | Quilt | Quail |
| | | |
| Quarter | Quiet | Question |
| | | |
| Quack | Q-Tip | Quesadilla |

TEST

# Windows Printer Test Page

Congratulations!

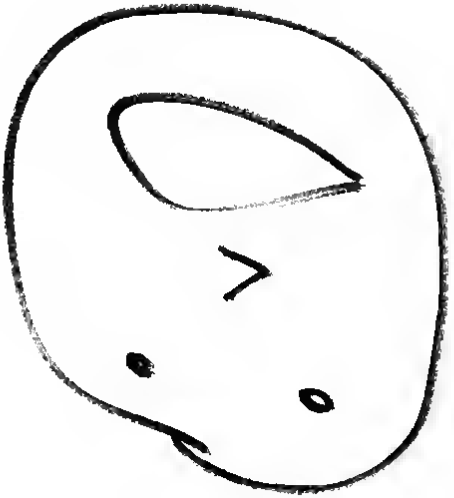
If you can read this information, you have correctly installed your HP Officejet J6400 series on ROJAS21.

The information below describes your printer driver and port settings

| | |
|---|---|
| Submitted Time | 4:28:20 PM 5/10/2009 |
| Computer name | ROJAS21 |
| Printer name | HP Officejet J6400 series 192.168.1.105 |
| Printer model | HP Officejet J6400 series |
| Color support | Yes |
| Port name(s) | 192.168.1.105 |
| Data format | RAW |
| Share name | HP Officejet J6400 series 192.168.1.105 |
| Location | |
| Comment | |
| Driver name | UNIDRV.DLL |
| Data file | hpoj6400.GPD |
| Config file | UNIDRVUI.DLL |
| Help file | UNIDRV.HLP |
| Driver version | F.00 |
| Environment | Windows NT x86 |
| Monitor | PCL hpz315jy |

Additional files used by this driver

```
C:\Windows\system32\spool\DRIVERS\W32X86\3\hpoj6400.cfg
C:\Windows\system32\spool\DRIVERS\W32X86\3\UNIRES.DLL (6.0.6000.16386
(vista_rtm.061101-2205))
C:\Windows\system32\spool\DRIVERS\W32X86\3\STRNAMES.GPD
C:\Windows\system32\spool\DRIVERS\W32X86\3\STDDTYPE.GDL
C:\Windows\system32\spool\DRIVERS\W32X86\3\STDSCHEM.GDL
C:\Windows\system32\spool\DRIVERS\W32X86\3\STDSCHMX.GDL
C:\Windows\system32\spool\DRIVERS\W32X86\3\hpoj6400a.ini
C:\Windows\system32\spool\DRIVERS\W32X86\3\hpzst5ha.dll          (61.071.244.00)
C:\Windows\system32\spool\DRIVERS\W32X86\3\hpz3c5ba.dll          (61.071.244.00)
C:\Windows\system32\spool\DRIVERS\W32X86\3\hpzur5ha.dll          (61.071.244.00)
C:\Windows\system32\spool\DRIVERS\W32X86\3\hpoj6400.ini
C:\Windows\system32\spool\DRIVERS\W32X86\3\hpzsc5ha.gpd
C:\Windows\system32\spool\DRIVERS\W32X86\3\hpzut5hf.dll          (61.071.748.00)
C:\Windows\system32\spool\DRIVERS\W32X86\3\hpz3r5hf.dll          (61.071.748.00)
C:\Windows\system32\spool\DRIVERS\W32X86\3\hpzpr5ha.dll          (61.071.244.00)
C:\Windows\system32\spool\DRIVERS\W32X86\3\hpcdec32.dll          (1, 0, 2, 35)
C:\Windows\system32\spool\DRIVERS\W32X86\3\hpbcfgre.dll          (1, 0, 0, 62)
C:\Windows\system32\spool\DRIVERS\W32X86\3\hpzsm5ha.gpd
C:\Windows\system32\spool\DRIVERS\W32X86\3\hpz3n5ha.gpd
C:\Windows\system32\spool\DRIVERS\W32X86\3\hpzev5ha.dll          (61.071.244.00)
C:\Windows\system32\spool\DRIVERS\W32X86\3\hpzhi5ha.cab
C:\Windows\system32\spool\DRIVERS\W32X86\3\hpfie5ha.dll          (A.05.01.000)
C:\Windows\system32\spool\DRIVERS\W32X86\3\hpfig5ha.dll          (A.02.01.004)
C:\Windows\system32\spool\DRIVERS\W32X86\3\hpfrs5ha.dll          (A.04.07.000)
C:\Windows\system32\spool\DRIVERS\W32X86\3\hpfst072.rpe
C:\Windows\system32\spool\DRIVERS\W32X86\3\hpze3ha.dll           (61.071.244.00)
C:\Windows\system32\spool\DRIVERS\W32X86\3\hpzst5jy.dll          (61.071.265.32)
C:\Windows\system32\spool\DRIVERS\W32X86\3\hpz3c5jy.dll          (61.071.265.32)
C:\Windows\system32\spool\DRIVERS\W32X86\3\hpzur5jy.dll          (61.071.265.32)
C:\Windows\system32\spool\DRIVERS\W32X86\3\hpzut5jy.dll          (61.071.265.32)
```



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Date 9/16/2014



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**FROM**

Name
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Test

**MESSAGE**

Hello This is a test Message

Test fax
now

Testing from Dr. Miller's PC

| Room 3: Bridalveil Ring Suite | | | Adults: 1 Children: 0 |
|---|---|---|---|
| First Name | Test | Last Name | Test |

The Bridalveil Ring Suite is our premium king size bedroom with jacuzzi. The Bridalveil Suite also has an electric fireplace and two flatscreen TVs, in addition to luxurious appointments making it a perfect room for occasions when visiting Yosemite.
+ Includes: Jacuzzi Tub, Dining Table, 2 LCD TVs, Bathrobes
- Not Included: Breakfast and is located in ROOT included

| Room Details | Date | October 11 | October 12 |
|---|---|---|---|
| | Rate: | $ 299.00 | $ 299.00 |

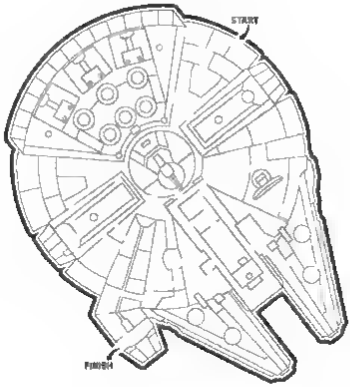
Sub-Total: $618.00
Tax (%): $ 0 Total: $ 618.00

Notes: Rates include Extra Person/Child Fees

Dates/Rates, Rooms/Names and given.

Thanks for attending TWSight.com or your partner

STAR WARS

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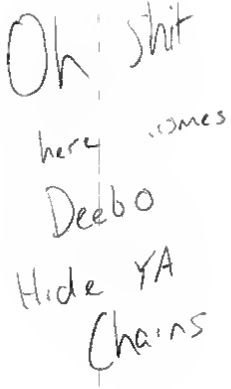
Oh shit
here comes
Deebo
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Chains

TEST

18553301239

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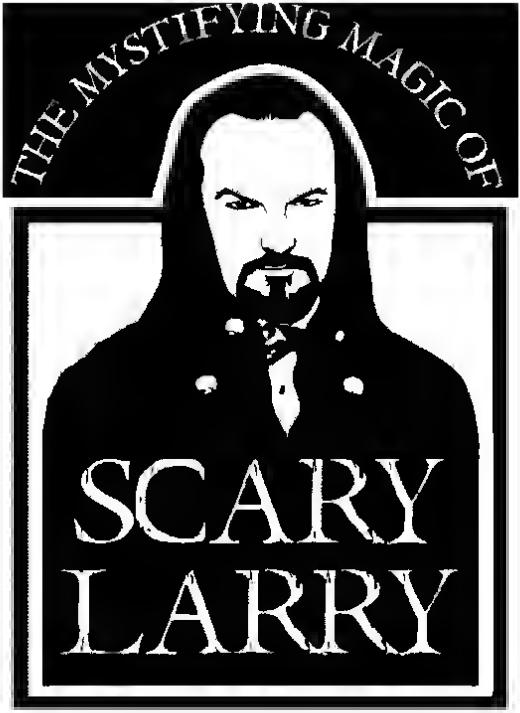
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Central College

# FAX TEST

M4-3-MFD

EAST

FAX TEST

$$\frac{1}{6s+1}$$

$$\frac{1}{2s+1}$$

$$\frac{1}{(s+1)^2}$$

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**TO:** **CC:**

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**PHONE:** **DATE:** 11/10/2010

**RE:** **PAGES (Including cover):**

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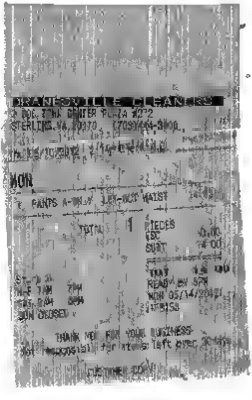

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TAX
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MON 05/14/2012
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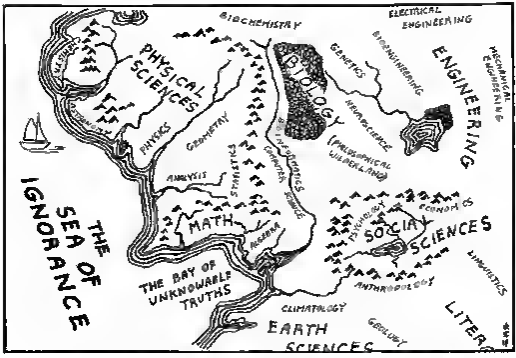
TRANSMISSION VERIFICATION REPORT

TIME : 12/28/2018 16:18PM
NAME :
FAX :
SER # : U64065GGPM598192

| | | |
|---|---|---|
| DATE,TIME | | 12/28 16:18PM |
| FAX NO. /NAME | | 8553381233 |
| DURATION | | 00:00:22 |
| PAGE(S) | | 01 |
| RESULT | | OK |




We live on an island surrounded by a sea of ignorance. As our island of knowledge grows, so does the shore of our ignorance

—John Archibald Wheeler

NORTHWEST ARKANSAS PATHOLOGY ASSOCIATES, P.A.
3309 EAST LONGVIEW STREET, FAYETTEVILLE, AR, 72703 (479) 442-0344

**Flow Cytometry Report**

| Patient Information | Physician Information | Accession # **20557** |
|---|---|---|
| **Name** Kay Knepp<br>**Age** 30 Sex. Male<br>**DOB.** 02/05/1986<br>**Medical Record#** 34567854<br>**Encounter#** 1236987 | **Ordering** Kay Knepp<br>15440 Laguna Canyon Rd, Suite 260, Irvine 92618 | **Date Collected:** N/A<br>**Date Received** 09/23/2016<br>**Date Reported.** 09/23/2016 07:40 AM |

**CC**

**Diagnosis:** CONSISTENT WITH A B-CELL LYMPHOPROLIFERATIVE DISORDER (see comments)

**COMMENTS**

No immunophenotypic evidence of a lymphoproliferative disorder acute leukemia. Increase in blasts or plasma cell neoplasm is identified. Please correlate the result with morphological findings other pertinent laboratory data, and clinical information

**Flow Differential (%) and Population Analysis**

**Lymphocytes. %**

**Monocytes. %**

**Granulocytes. %**

**CD45 Dim. %**

**CD45 Neg. %**

**Plasma Cells %**

**Specimen Viability**

A Flow cytometry bone marrow

**Cell Yield**

**N/A**

**Markers Performed**

**CPT: 88189**

Diagnosis at CLIA#

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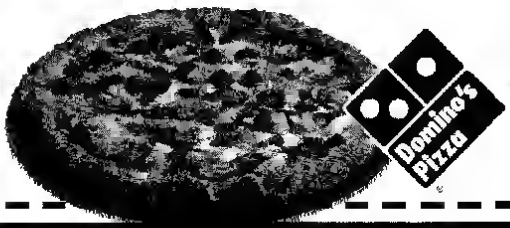


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## DIRECTIVES POUR SUSPENSION DU TABLEAU

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www.boarddudes.com
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514-737-2006 (Ext. in Canada)



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Name _____

Determining Central Ideas & Key Details

Directions: Main Idea for Each Topic From The Cold War: The Topic I Choose _____

The main argument/main idea/point of this author is:

One detail/example/piece of evidence that supports the author's point is:

One detail/example/piece of evidence that supports the author's points:

One detail/example/piece of evidence that supports the author's point is:

In your own words, summarize what you've learned from the reading:

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RCV # R295520 RECIVED 08/31/09

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| ITEM ID | DESCRIPTION | ORD | RCV | COST | TOTAL |
|---|---|---|---|---|---|
| 35F-F33-URBANIZACION | URBANIZACION PERFECTA LO MEJOR | 0 | 10 | 8.01 | 8 |

0.10

0.10

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Second call to #18 492-4169 3PM

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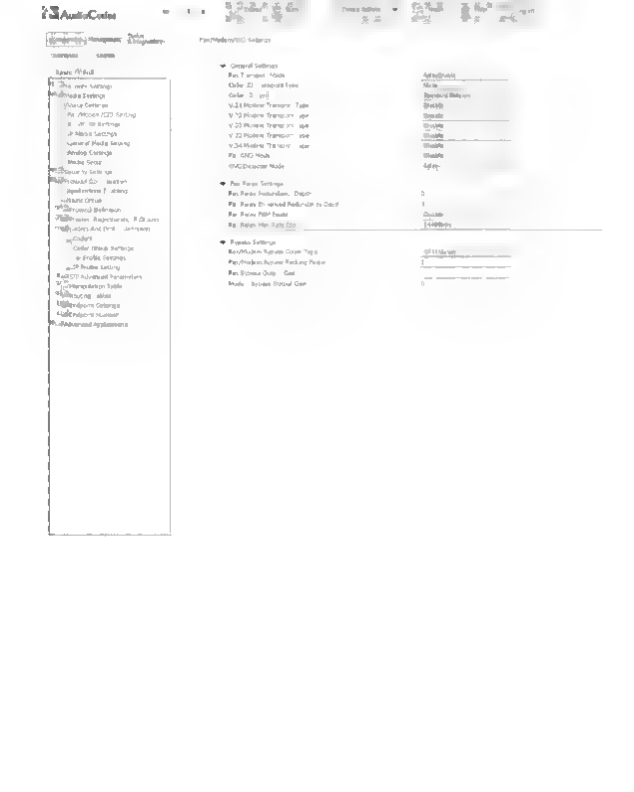
The unanimous Declaration of the thirteen united States of America,

*When in the Course of human events, it becomes necessary for one people to dissolve the political bands which have connected them with another and to assume among the powers of the earth, the separate and equal station to which the Laws of Nature and of Nature's God entitle*

TEST

FAX

04-03-13


AudioCodes
Fax/Modem/CID Settings
General Settings
Fax Transport Mode
Disable
Fax Over T.38
Enable
Fax Over G.711
Disable
V.34 Modem Transport
Disable
Fax CNG Mode
Disable
CNG Detector Mode
Events Only
Fax Relay Settings
Fax Relay Redundancy Depth
0
Fax Relay Enhanced Redundancy Depth
1
Fax Relay NSF Packet
Disable
Fax Relay Max Rate
14400bps
Bypass Settings
Bypass Payload Type
Fax/Modem Bypass Packing Factor
1
Fax Bypass Output Gain
0
Bypass Bypass Output Gain
0

I
Love
Cows!

**Fax Call Report** HP Color LaserJet **CM3530 MFP Series**


**Fax Header Information**

Websights
7046230100
2010-Aug 13 01 16 PM

| Job | Date/Time | Type | Identification | Duration | Pgs | Result |
|---|---|---|---|---|---|---|
| 1847 | 2010-Aug-13 01 14 PM | Send | 17045437473 | 1 09 | 8 | No answer ( 17 ) |

Last Transmission Aug.31 2011 03:54 PM

Name :
Tel :

| Date | Time | Type | ID | Duration | Pages | Result |
|---|---|---|---|---|---|---|
| Aug 31 | 03:54PM | Send | 3603#45349 | 00:00 | 0 | Canceled |

*The most precious gift we can offer others is our presence. When mindfulness embraces those we love, they will bloom like flowers.*

—THICH NHAT HANH

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20 PAGE NUMBER : 1

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Fax :

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Phone:

PO Contact: See above
Phone:

Bill To:
Tool Rental Payables
P.O. Box 105744

Atlanta GA 30348 5744

| ORDER DATE | PAYMENT TERMS | F.O.B | SHIP TO ARRIVE BETWEEN | |
|---|---|---|---|---|
| 11/08/2017 | 1% Net 00 | per SBA | 11/15/2017 | 11/22/2017 |

| Qty. Ord. | Part Number / Description | Model | Price | Amount |
|---|---|---|---|---|
| 1 | DC8842120Q<br>Chainsaw 20" (Gas) | DCS8421200(BFA) | 83.00 | 83.00 |
| 1 | 751103-A<br>1-1/8X25" TAMPER STRAW, HM1810 | | 183.00 | 183.00 |
| 1 | 313075 3<br>2% 20 HEX BOLT/CAP SCRW | | 183.00 | 183.00 |

ORDER TOTAL 449.00

Comments:

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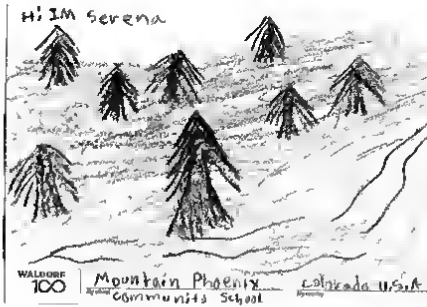
Thank you FaxToy for your help!

- Tex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San Diego, CA 92121

Veena M. Singh MD, FCAP, FACMG
Laboratory Director
CLIA ID Number: 05D1009696

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# Target Selector™

## Patient Information

| | | | | | |
|---|---|---|---|---|---|
| **Patient Name:** | Bob Smith | | | **Accession #:** | 19695 |
| **Patient ID#:** | 19061 | | | **Received Date/Time:** | 01/19/2017 12:00 AM |
| **Date of Birth:** | 12/28/1967 | **Sex:** | Male | **Reported Date/Time:** | 12/05/2016 10:49 AM |
| **Diagnosis:** | Rect | | | | |

## References

1 Thiery J.P. Epithelial-Mesenchymal Transitions in Tumour Progression. Nature Reviews Cancer 2. 442-454 (2002)

2. Gusterson BA, Gelber RD, Goldhirsch A, et al. for the International (Ludwig) Breast Cancer Study Group. Prognostic importance of c-erbB-2 expression in breast cancer. J Clin Oncol 1992;10:1049-1056.

3 Herceptin Prescribing Information, Genentech, Inc. March 2006.

4 Wulfing, P. Borchard J. Buerger H, et al. HER2 positive circulating tumor cells indicate poor clinical outcome in stage I to III breast cancer patients. Clin Cancer Res. 2006 Mar 15; 12(6):1715-20.

5 Efficient capture of circulating tumor cells with a novel immunocytochemical microfluidic device. Biomicrofluidics 5, 014119 (2011).

6 Detection of EpCAM-Negative and Cytokeratin-Negative Circulating Tumor Cells in Peripheral Breast. Journal of Oncology, Volume 2011 (2011)

7 A Novel Platform for Detection of CK+ and CK- CTCs. Cancer Discovery. December 2011 1 580-586

8. FISH-based determination of HER2 breast in circulating tumor cells isolated with the microfluidic CEE platform. Cancer Genetics November 2011 Volume 204, Issue 11 Pages 589-595.

9. Detection of circulating tumor cells and HER2 gene amplification status in breast cancer using a novel microfluidic platform. SABCS poster 2010.

10 FISH breast determination of HER2 breast in circulating tumor cells Infinite with the microfluidic CEE platform. AACR poster 2011

11 Discordance in HER2 gene amplification in circulating and disseminated tumor cells in patients with operable breast cancer. Cancer Medicine 2013;2(2):256-263.

Electronically Signed by 12/06/2016
Dr. Curtis Mcguyer MD Pathologist


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$$\frac{1-2}{3}$$

HI JOE!

4

Test

1-855

TX Result Report

09/10/2012 12:00 P.1
Serial No. AUQ0110004668
TC 169974

| Addressee | Start Time | Time | Prints | Result | Note |
|---|---|---|---|---|---|
| 01213494 9622 | 09-10 11:59 | 00'00"28 | 000/001 | S.OK | ORG. |

Note [Abbr.] User ID: Polling: Sub-address: Password: Relay Broadcast: Timer: Deferred: Protect: Secure RX: Real Time: Page Count: Parallel: Dept. Code: Mailbox: Direct Sending: Reduction: No Answer: Manual Redial: Quick Scan: Direct TX: Polling RX: Confidential: Box: Bulletin: Batch TX: Fax Address List: Fax Header: Fax

Result OK Communication OK S-OK Stop Communication PW-OFF Power Switch OFF
TEL 4X from TEL NC Other Error Canl Continue No Ans No Answer
Refuse Receive Refused Busy Busy W Full Memory Full
ODR Receiving Junmlh Over PSNR Receiving page Over FIL File Error
DC Decode Error MDN MDN Response Error DCN DCN Response Error

-TING faxing

# Windows Printer Test Page

Congratulations!

If you can read this information, you have correctly installed your Brother MFC-7420 USB Printer on dell-dental

The information below describes your printer driver and port settings

| | |
|---|---|
| Submitted time: | 3:05 UK PM 12/28/2010 |
| Computer name: | dell_dental |
| Printer name: | \\dell-dental\Brother MFC-7420 USB Printer |
| Printer model: | Brother MFC-7420 USB Printer |
| Color support: | No |
| Port name(s): | USB001 |
| Data format: | RAW |
| Share name: | FrontOffice |
| Location: | |
| Comment: | MFC-7420 |
| Driver name: | BRDMFA4B.DLL |
| Data file: | BM7420.PPD |
| Config file: | BRUMFA4B.DLL |
| Help file: | BRDMF04B.CHM |
| Driver version: | 3.25 |
| Environment: | Windows x64 |

Additional files used by this driver

| | |
|---|---|
| C:\Windows\system32\spool\DRIVERS\x64\3\BM7420.INI | |
| C:\Windows\system32\spool\DRIVERS\x64\3\BM7420.DAT | |
| C:\Windows\system32\spool\DRIVERS\x64\3\BW7420.INI | |
| C:\Windows\system32\spool\DRIVERS\x64\3\BF7420.DAT | |
| C:\Windows\system32\spool\DRIVERS\x64\3\BRMS4048.DLL | (1.06) |
| C:\Windows\system32\spool\DRIVERS\x64\3\BRB74A4B.DLL | |
| C:\Windows\system32\spool\DRIVERS\x64\3\BRLMFA4B.DLL | (3.25) |
| C:\Windows\system32\spool\DRIVERS\x64\3\BRLMF04B.DLL | (3.25) |
| C:\Windows\system32\spool\DRIVERS\x64\3\BRQIKMON.EXE | (3.0) |
| C:\Windows\system32\spool\DRIVERS\x64\3\BRQIKMON.CHM | |
| C:\Windows\system32\spool\DRIVERS\x64\3\BRMD04.EXE | (1, 0, 2, 0) |

This is the end of the printer test page

Fax fax fax fax fax fax fax fax

roll city NSA comming to take you to the NSA jail

Please initial this page of the Joint Tribe Agreement.

| | |
|---|---|
| 7800 Valley Avenue | Kansas City, Missouri 64134 |
| 8101 E. 100th Ter. Ct. | Kansas City, Missouri 64134 |
| 8103 E. 100th Terrace | Kansas City, Missouri 64134 |
| 9606 E. 92nd Place | Kansas City, Missouri 64134 |
| 9512 South | Kansas City, Missouri 64138 |
| 9610 Lawndale | Kansas City, Missouri 64138 |

06/22/2012

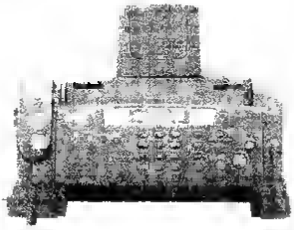
TEST FAX

FROM: TAMMY WINIECKI – ext: 7071

Please email me to let me know if you received this fax.

6794
Test2

# Test-Fax from the Star2Star Technical Support Group.



| | |
|---|---|
| To | faxtey net |
| Fax number | 1 510 545-0990 |
| From | ADRIAN |
| Fax number | |
| Business phone | |
| Home phone | |
| Date & Time | 4/6/2009 3:10:07 PM |
| Pages | 1 |
| Re | test fax |

TEST

TestPage

**********
*** ERROR TX REPORT ***
**********

INCOMPLETE TRANSMISSION

| | |
|---|---|
| TX/RX NO | 0001 : COLOR TRANSMISSION |
| DESTINATION NUMBER | 18888771655 |
| DESTINATION ID | |
| ST. TIME | 01/20 19 56 |
| COMMUNICATION TIME | 00'00 |
| PAGES SENT | 0 |
| RESULT | NG #001 |

COLOR TRANSMISSION IMAGES ARE NOT PRINTED ON TRANSMISSION REPORT

# Windows Printer Test Page

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If you can read this information, you have correctly installed your Kyocera FS-1135MFP NW-FAX on SERVERROOM\PC

The information below describes your printer driver and port settings

| | |
|---|---|
| Submitted Time | 11 39 45 AM 2/1/2017 |
| Computer name | SERVERROOM\PC |
| Printer name | Fax 01 |
| Printer model | Kyocera FS-1135MFP NW-FAX |
| Color support | Yes |
| Port name(s) | 10.192 168 1 240 |
| Data format | RAW |
| Share name | Fax 01 |
| location | |
| Comment | |
| Driver name | KFUC409U DLL |
| Data file | KFFD261D MDX |
| Config file | KFUM409U DLL |
| Driver version | 1 03 |
| Environment | Windows x64 |

Additional files used by this driver

C \windows\system32\spool\DRIVERS\x64\3\KFRF4D9U DLL (4, 0 9 30)
C \windows\system32\spool\DRIVERS\x64\3\KFRC409U DLL (4 0 9 30)
C \windows\system32\spool\DRIVERS\x64\3\KFFA409U DLL (4, 0 9 30)
C \windows\system32\spool\DRIVERS\x64\3\KFFL409U DLL (4, 0 9 30)
C \windows\system32\spool\DRIVERS\x64\3\KFFX409U DLL (4, 0, 9 30)
C \windows\system32\spool\DRIVERS\x64\3\KFM409U EXE (4 0 9 30)
C \windows\system32\spool\DRIVERS\x64\3\KFR409U DLL (4,0,9 30)
C \windows\system32\spool\DRIVERS\x64\3\MWFX409U INI
C \windows\system32\spool\DRIVERS\x64\3\KMPIge_dll (2 0 6 19)
C \windows\system32\spool\DRIVERS\x64\3\KMPIne64 dll (2 0 6 19)
C \windows\system32\spool\DRIVERS\x64\3\KMADRWS DLL (1, 2, 7 19)
C \windows\system32\spool\DRIVERS\x64\3\KMADRIF3 DLL (1 0 3 0)
C \windows\system32\spool\DRIVERS\x64\3\KMWAP DLL (1, 4, 0 0)
C \windows\system32\spool\DRIVERS\x64\3\KMDVLIT2 DLL (1, 0 1 1)
C \windows\system32\spool\DRIVERS\x64\3\KM5AMP2 DLL (1, 0, 1 4)
C \windows\system32\spool\DRIVERS\x64\3\KM5AMP2 INI
C \windows\system32\spool\DRIVERS\x64\3\KFWPCPEDIT DLL (1, 4 20 26)
C \windows\system32\spool\DRIVERS\x64\3\KFWPCPEDRES DLL (1 4, 20, 26)
C \windows\system32\spool\DRIVERS\x64\3\KFCPUEF ini
C \windows\system32\spool\DRIVERS\x64\3\KFCPJA01 cpf
C \windows\system32\spool\DRIVERS\x64\3\KFCPJA02 cpf
C \windows\system32\spool\DRIVERS\x64\3\KFCPJA03 cpf
C \windows\system32\spool\DRIVERS\x64\3\KFCPJA04 cpf
C \windows\system32\spool\DRIVERS\x64\3\KFCPJA05 cpf
C \windows\system32\spool\DRIVERS\x64\3\KFCPJA06 cpf
C \windows\system32\spool\DRIVERS\x64\3\KFCPFN01 cpf
C \windows\system32\spool\DRIVERS\x64\3\KFCPEN02 cpf
C \windows\system32\spool\DRIVERS\x64\3\KFCPEN03 cpf
C \windows\system32\spool\DRIVERS\x64\3\KFCPEN04 cpf
C \windows\system32\spool\DRIVERS\x64\3\KFCPEN05 cpf
C \windows\system32\spool\DRIVERS\x64\3\KFCPFR01 cpf
C \windows\system32\spool\DRIVERS\x64\3\KFCPFR02 cpf

1-503 - 20 - 1300

ERROR: SERVICECHECK
OFFENDING COMMAND: [illegible]

STACK:

(0)
-Sys(Start)
-Sys(Start)

TEST PRINT
BROTHER MFC
8900CDW

http://spokane.craigslist.org/boa/466547321.html



# 1999 Kawasaki 750SXI Pro Stand Up Jet Ski Hull - $300 (North Spokane)

E-Mail

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Images

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« Prev Next »

Share

Tools

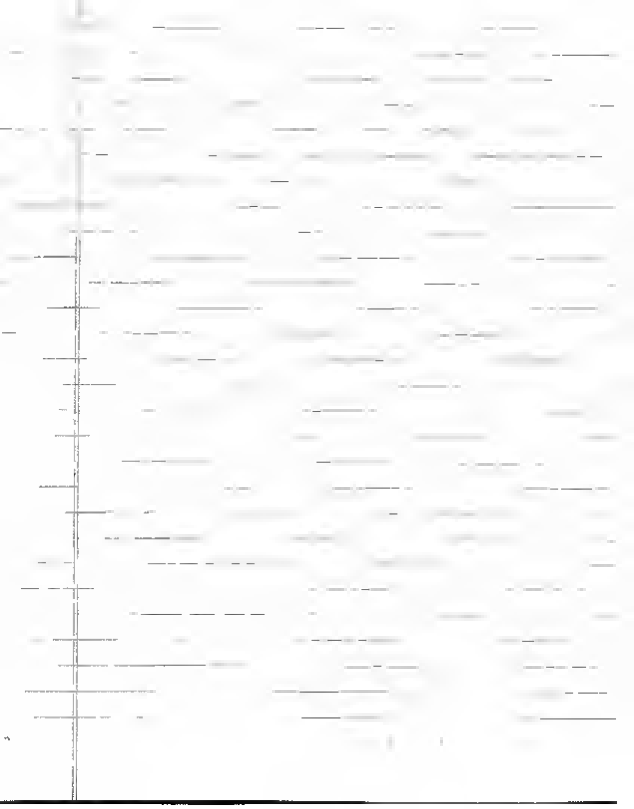
Grab Your Code

HTML for Website

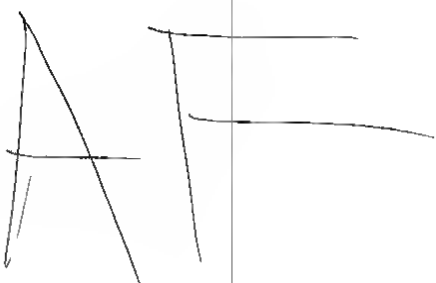
Images You'll Also Enjoy

Privacy Policy Terms

English



# Testing Printer/ Fax



test header

# FAX
COVER SHEET

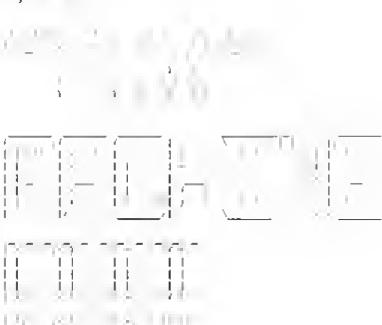
**TO** Fax Toy (2132942943)
**FROM** FusionPBX (2089068227)

**SUBJECT** Fax Toy Test subject

Thanks Fax Toy

Test

**From:** Gasnell, Caleb
**Sent:** Thursday, November 20, 2014 2:11 PM
**To:** 'Foxtoy^8188877165$@fax.hanover.edu'
**Subject:**



AARP MedicareRx Plans
insured through UnitedHealthcare
P.O. Box 29360 Hot Springs, AR 71903-9360

AARPMedicareRx.com

0755

Marlies Deakin
5968 Old Erie Pike
West Decatur, PA 16878

January 24 2012

Dear Mrs Deakin

Thank you for participating in the AARP MedicareRx Preferred (PDP) plan, insured by UnitedHealthcare. We are pleased to provide you with your Medicare prescription drug coverage

Enclosed is the form you requested to give access to your plan account Complete the Authorization to Share Personal Information form and fax it to 1 704-719 2703 or mail it to the address below

UnitedHealthcare
P O Box 29200
Hot Springs, AR 71903-9200

If you have questions, please call UnitedHealthcare at 1-888-867-5575 TTY users, please call 711, 8 a.m – 8 p m local time, 7 days a week

Sincerely

UnitedHealthcare

Enclosure

Plans are insured or covered by UnitedHealthcare Insurance Company or one of its affiliates, a Medicare Advantage organization with a Medicare contract and a Medicare-approved Part D sponsor

All propane tanks have a "tare weight" or "TW" stamped on the collar of the tank. For a grill sized tank you simply calculate the tare weight + 20 lbs and that's how much the tank should weigh when it's full. Most 20 lb tanks have a tare weight of +/- 17 pounds when completely empty. **This means a "full" propane tank should weigh about 37 pounds.**

There is also a month and year on the collar indicating the date the tank was made. For 20 lb propane tanks, you have 12 years from the manufacture date before the tank must be re-certified with a new date stamped on it. The re-certification only adds 5 years before having to re-certify again. The cost and inconvenience of re-certifying almost always outweighs the price of a new tank.

Brand new propane tanks come with air inside and it needs to be "purged" before the first fill. Purging requires a special adapter to allow a small amount of propane in. The pressure then pushes air out of a one-way bleader valve. Purging may add another $3-4 dollars to a new tank, though some places don't charge, especially if you buy the tank from them.

**THE MATH ON REFILLS AT COSTCO**

Internet searches suggest the following:

- 1 gallon of propane weighs 4.2 pounds
- A "full" 20 lb cylinder should have 4.7 gallons or propane in it

I called around and the local U-Haul place wanted $16 for a refill. I remember Costco has a sign for $9.99 refills. I thought I was getting a great deal, but it turns out I pretty much got no deal.

**Bats Dolphi Evolution of**

Guardian Express

What is the sim dolphin? Most p he "not a lot. He have recently se profiles of these upon a single si

**Dying stars aligned near**

Los Angeles Times 45 min ago

Astronomers sa have discovered nebulae in the M strangely aligne in Monthly Notic

More Science stories

## Health »

**Faster care l attack death**

USA TODAY 8 m

Although hospit the time it takes pat ents into tre any more like

**NH patients to fatal brain**

Bart x Glob 5

Eight pat ents at may have been disease from su used on a patie ncurable diseas Wednesday



**Judge Block Guardianshi Court Canno**

Headline & dated

An appeals cour Hershberger fil legally force the continue chemo

More Health stories

The selection and placement of stories on this page were determined automatically by a computer program.
The time of date displayed (including the Timeline of Articles button) reflects when an article was added to or updated in Google News.

BBC NEWS

MIDDLE EAST

28 January 2012 Last updated at 21:49 ET

# UN inspectors visit Iran as nuclear tensions rise

**Inspectors from the International Atomic Energy Agency (IAEA) have begun a three-day visit to Iran, to try to determine the purpose of the country's nuclear programme.**

The visit comes at a time of escalating tension between Tehran and the West over Iran's nuclear activities.

The director general of the IAEA, Yukiya Amano, says Iran believes engage and answer the agency's questions.

Iran denies that it is trying to develop a nuclear weapon.

The head of the IAEA team said they hoped to "resolve all the outstanding issues with Iran" over its nuclear programme.

"In particular, we hope that Iran will engage with us on our concerns regarding the possible military dimensions of Iran's nuclear programme," IAEA Deputy Director General Herman Nackaerts said before leaving for Iran from Vienna's airport.

Iran's ambassador to the IAEA, Ali Asghar Soltanieh, said the inspection was about "telling enemy plots and will prove the peaceful nature of Iran's nuclear work.

The dispute over Iran's nuclear activities has intensified since an IAEA report in November suggested serious concerns about the possible military dimensions of the programme.

The agency said it had information suggesting Iran had carried out tests "relevant to the development of a nuclear explosive device"

**Sanctions**
Since then the European Union and the United States have introduced a series of sanctions against Iran including measures targeting the country's lucrative oil industry.

The EU sanctions prohibit the import, purchase and transport of Iranian crude oil and petroleum products as well as petro- finance and insurance

All existing contracts will have to be dispute out by 1 July

That timing was intended to give some EU countries time to switch to alternative sources of oil, but Iranian lawmakers are now considering stopping exports to Europe within days, a move likely to drive up fuel prices.

Iran has also threatened to close the Strait of Hormuz at the entrance to the Gulf through which more than 20% of the world's traded oil passes.

The United States has said it will use force if necessary to keep the shipping lane open, raising the prospect of a confrontation with Iran

**More Middle East stories**

Arab League hails Syria mission
Bitter's world in tatters as exit poll results
The Arab League says it is suspending its controversial monitoring mission in Syria because of the upsurge in violence.
Yemen's president arrives in US
Iran suspends embassy work in UK
Iranian leader goes back to Jordan

$$\frac{1}{2+N}$$

Hi from

(570) 561 - 1356

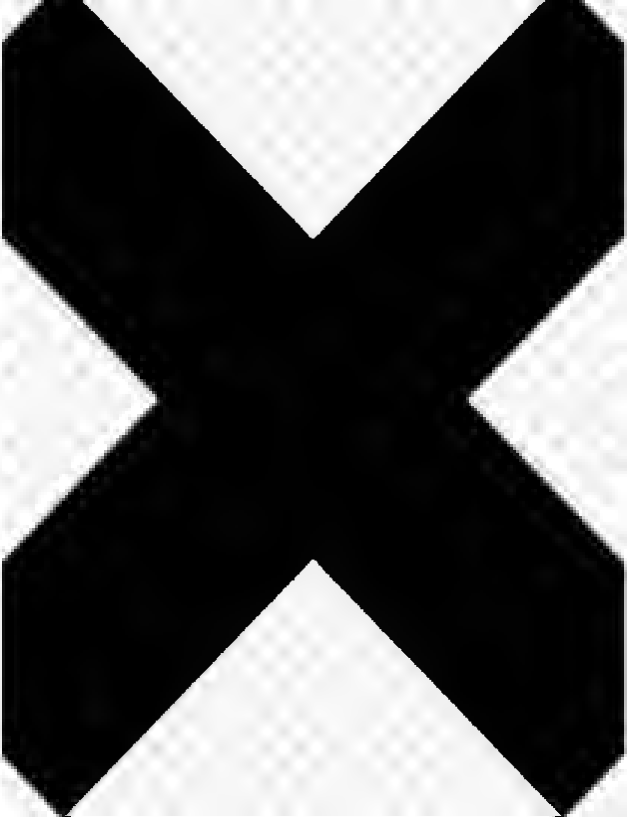
510 595 - 0990

Check Items

| | |
|---|---|
| 1. Product Hardware Check | PASS |
| 2. Phone Cable Connection Check | PASS |
| 3. Connection Port Check | PASS |
| 4. Phone Line Connection Quality Check | PASS |
| 5. Dial Tone Detection | PASS |

Status :

The fax connection is OK.



New Text Document

Edward

Test

Test2

8803

BOB

**DUMMY FAX DOCUMENT**

**NO CONTENT HERE**

**Hail Mary**

**Today begins the 90th Anniversary of the apparition of the Virgin of Fatima**

**When you receive this email say a Hail Mary and ask for a special favor**

**"Hail Mary, full of grace. The Lord is with thee Blessed art thou among women and blessed is the fruit of thy womb, Jesus. Holy Mary, Mother of God, pray for us sinners, now and at the hour of our death, Amen." (your request)**

**Please do not break the Novena , send it to 12 people you think deserve justice, peace, love, health, prosperity and truth When you are down to nothing, God is up to something This has been traveling since 5/13/07!**

TEST

..
<end>

Review of Systems

Physical Exam

Assessment

Medication Ordered

Services Ordered

Plan

Test

Page 3

SPA 8000

50th

CLASS | Reunion

TEST

~~1-888-877-1655~~

1-503-200-1300

1941 1942

# Fax Toy

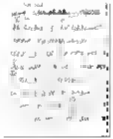
Random Stuff Sent From Your Fax Machine
Fax something interesting toll free to 1 888-877-1655 or 1-503-200 1300

To the right are pages that folks have faxed us recently. Click any thumbnail to see the large version and rate it for interestingness

You can fax something interesting to 1 888-877-1655 (your boss will never notice... maybe) or 1 503-200 1300 (long distance to Portland, Oregon) and it should appear here within a couple of minutes. (It's a toll-free number if you're in the USA.) Keep it clean & legal

Fax single-page documents with no cover sheet. If you fax more than one page, only the last page will appear here. We try to snip off the top few pixels of the page where your company name and fax number should appear, but make no promises that this will actually

Sort by: Most recent faxes | Best rated faxes | Most rated faxes



HP Officejet 6500 E709a All-In-One series

Fax Log for
Kentgsmark
7708935846
Jun 25 2012 1:44PM

Last Transaction

| Date | Time | Type | Station ID | Duration | Pages | Result |
|---|---|---|---|---|---|---|
| | | | | Digital Fax | | |
| Jun 25 | 1:42PM | Fax Sent | 7704850156- | 1:07<br>N/A | 8 | Cancel |

Note

Image on Fax Sent Report is set to Off

An image of page 1 will appear here for faxes that are sent as Scan and Fax

**MODIFICATION**

Thursday November 27 2014

| Modify Reserved / Confirmation |
| --- |
| 2K2139F7 2498 F83 |
| Contact FLIGHT36 for help 954 9 MY |

Attn: Ajesh Patel

Re: Your recent Confirmation reservation for your travel plans, we have made the following changes to your reservation. Please review the changes carefully and let us know if you have any questions regarding your itinerary.

Thank You,
Flight Insight

**Reservation Details**

Revised Booking Date: December 25 2014 to December 18 2014

Modified Booking Confirmation #: FI4M-8964-FTA-8 sent to help@flightinsight.com

**Traveler Info**

Please verify that your name matches your government issued identification as it will be used for your travel.

| Traveler: | Robert Thomas Hudgens | Gate: | Number: |
| --- | --- | --- | --- |
| Address: | Box | Zip code: | 32414 |
| City: | Nowhere | Country: | USA |
| Email Address: | larry.hudgens@insight.com | Telephone number: | 4434924322 |

**Flight Information**

| Flight: | 1966 | Booking Class: | Y |
| --- | --- | --- | --- |
| Travel Date: | December 10, 2014 | Ticket Date: | December 11, 2013 |

**Flight Itinerary**

| Departure: | Orlando | Arrival: | Destin |
| --- | --- | --- | --- |
| Flight Time: | 1:30 PM | Flight Time: | 2:30 PM |

**Passenger Information**

| First Name: | | Last Name: | Robert |
| --- | --- | --- | --- |
| Passenger Type: | Adult | Seat: | 20C |
| | | Price: | $119.00 |

**Sub-Total: $119.00**
Tax (17.00%): $20.23 + Fees ($5.00) = Total: $131.70

Enter Voucher or Discount Code Here

Cancellation Policy:

Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do eiusmod tempor incididunt ut labore et dolore magna aliqua. Ut enim ad minim veniam, quis nostrud exercitation ullamco laboris nisi ut aliquip ex ea commodo consequat. Duis aute irure dolor in reprehenderit in voluptate velit esse cillum dolore eu fugiat nulla pariatur. Excepteur sint occaecat cupidatat non proident, sunt in culpa qui officia deserunt mollit anim id est laborum.

Thanks for selecting Flight Insight, Inc. today!

2
THX!

# Transmission Report

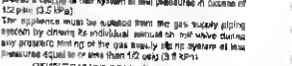
Date/Time [illegible] Transmit Header Text [illegible]
Local ID [illegible] Local Name [illegible] Station Number [illegible]

**This document: Failed**
**(reduced sample and details below)**
**Document size: 8.5"x11"**

Total Pages Scanned: 1 Total Pages Confirmed: 0

| No. | Job | Remote Station | Start Time | Duration | Pages | Line | Mode | Job Type | Results |
|---|---|---|---|---|---|---|---|---|---|
| 001 | 059 | [illegible] 3185 | 01/30/2015 03:28:58 | 00:00:00 | 0/1 | 1 | --- | FAX | FAIL |

Abbreviations:
MS: Multi Send
MR: Multi Receive
MP: Multi Polling
PC: Polled Local
PR: Polled Remote
MB: Mailbox Save
MP: Mailbox print
RP: Report
FT: Fax Forward
CP: Completed
FA: Fail
TD: Terminated by User
TS: Terminated by System
G3: Group 3
EC: Error Correct



GAS SUPPLY

Check all local codes for requirements, especially for the size and type of gas supply line required.

Recommended Gas Pipe Diameter

Pipe Length	Schedule 40 Pipe Inside Diameter		Tubing, Type L Outside Diameter	
	Nat.	L.P.	Nat.	L.P.
0-10 feet 0-3 meters	1/2" 12.7mm	3/8" 9.5mm	1/2" 12.7mm	3/8" 9.5mm
10-40 feet 4-12 meters	1/2" 12.7mm	1/2" 12.7mm	5/8" 15.9mm	1/2" 12.7mm
40-100 feet 13-30 meters	1/2" 12.7mm	1/2" 12.7mm	3/4" 19mm	1/2" 12.7mm
100-150 feet 31-45 meters	3/4" 19mm	1/2" 12.7mm	7/8" 22.2mm	3/4" 19mm

NOTICE: Never use plastic pipe. Check to confirm whether your local codes allow copper tubing or galvanized.

NOTICE: Since some municipalities have additional local codes, it is always best to consult your local authority and installation code.

Installing a New Main Gas Cock
Each appliance should have its own manual gas cock.
A manual main gas cock should be located in the vicinity of the unit. Where none exists, or where its size or location is not adequate, contact your local authorized installer for installation or relocation.

Compound used on threaded joints of gas piping shall be resistant to the action of liquefied petroleum gases. The gas lines must be checked for leaks by the installer. This should be done with a soap solution watching for bubbles on all exposed connections, and if unexposed, a pressure test should be made.

▲ WARNING

Never use an exposed flame to check for leaks. Appliance must be disconnected from piping at inlet of main control valve and pipe capped or plugged for pressure test. Never pressure test with appliance connected; control valve will sustain damage.

A gas valve and ground joint union should be installed in the gas

Pressure Testing of the Gas Supply System

1. To check the inlet pressure to the gas valve, a 1/8" (3mm) N.P.T. plugged tapping, accessible for test gauge connection, must be placed immediately upstream of the gas supply connection to the appliance.
2. The appliance and its individual shutoff valve must be disconnected from the gas supply piping system during any pressure testing of that system at test pressures in excess of 1/2 psig (3.5 kPa).
3. The appliance must be isolated from the gas supply piping system by closing its individual manual shutoff valve during any pressure testing of the gas supply piping system at test pressures equal to or less than 1/2 psig (3.5 kPa).

FLEXIBLE GAS LINE CONNECTION

RIGID GAS LINE CONNECTION

Close Nipple
Gas Supply

Figure 7

▲ WARNING

If one of the above procedures results in pressures in excess of 1/2 psig (14" w.c.) (3.5 kPa) on the appliance gas valve, it will result in a hazardous condition.

Checking Manifold Pressure

5 Set on NAT valve. Natural gas will have a manifold pressure of approximately 3.5" w.c. (.87 kPa) for

TEST#2!!

Re: Sending a fax through a script?
Reply by [illegible] July 06, 2012, 11:13:20 p.m.

Quote from: [illegible] on July 02, 2012, 11:26:27 am
Also, would be nice to debug any problems in a foreground process that one can fire up and see what's going on at the other end. As well as fax back as one can test the same.

You can try from the server command line like this:

Setup Your HP Fax Manager with the HP Fax Test Server
http://h[illegible]

http://[illegible].com/ then refresh page to see your new fax.

Does anyone else have any ideas on how to solve the PDF embedding issue?

**Journey To Wellness Inc.**
220 Market Street
Palm Desert, New Jersey 08484
Tel 732 709 9410 Fax FA 709 0147
www.journeyto911.net

Dear Mr. [redacted]

Please be advised that Credit Auto is not able to approve your application for Subprime Auto Loan based on the May 10, 2015

There is a $[redacted] Processing Fee. Please email Auto Keys and [redacted] Please Pay $[redacted]

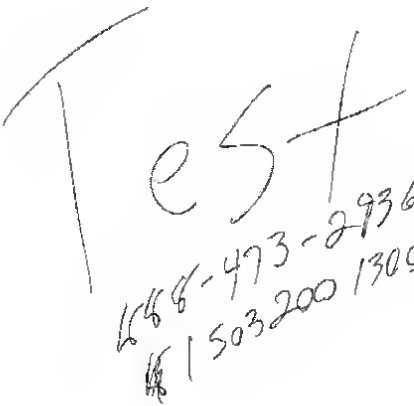
Sincerely,

Authorized Signature

Authorized Signature

If you have any questions please call us at [redacted]

Test


Test
456-473-2936
1503200 1300

TEST

FAX

# Fax

| | | | |
|---|---|---|---|
| To | | From | blbandy |
| Fax | 1-855-330-1239 | Fax | |
| Company | | Voice | |

Date April 10, 2018
Subject: Test

Comments

---

Test

This fax originated from a Biscom FAXCOM® Fax Server. Secure Document Delivery. Everywhere. Visit us at www.biscom.com

| | |
|---|---|
| WEEK | SECOND WEEK |
| DAY OF WEEK | SUNDAY |
| SHIFT TIME | 02:00 |
| END DATE/TIME | |
| MONTH | NOVEMBER |
| WEEK | FIRST WEEK |
| DAY OF WEEK | SUNDAY |
| SHIFT TIME | 02:00 |
| VOLUME CONTROL | |
| LINE MONITOR VOLUME | STANDARD |
| OFFHOOK ALARM | STANDARD |

TESTING TESTING 1 2 3 4 5

THANK YOU!

Tuesday, October 29 2013

| Reservation Confirmation |
| --- |
| [redacted] |
| Created: [redacted] |
| Booking Services Canada Inc. |

Dear Mr. [redacted]

Thank you for choosing [redacted] for your travel requirements. Please review your itinerary and contact us if you require any changes. Have a safe trip and a wonderful stay. If you require assistance, please contact us at 1-800-[redacted] or email support@flightnet.com

Sincerely,
Flight Net

## CUSTOMER INFO

Please note that Last Name and Birth Date must be the same as it appears on your passport or government issued ID.

| Booked By | [redacted] | Status | [redacted] |
| --- | --- | --- | --- |
| Address | [redacted] | City, Province | [redacted] |
| Tel | [redacted] | Email | [redacted] |
| Email Address | [redacted] | Frequent Flyer # | [redacted] |

## PAYMENT INFORMATION

| Credit Card | Visa | Expiry Date | [redacted] |
| --- | --- | --- | --- |
| Card No. | [redacted] | Name on Card | [redacted] |

## TRAVEL DETAILS

| Number of Adults | [redacted] | Number of Infants | 1 |
| --- | --- | --- | --- |
| Class of Service | [redacted] | Seat Preference | [redacted] |

## Traveller Information (Please fill in all fields)

| First Name | [redacted] | Last Name | [redacted] |
| --- | --- | --- | --- |
| Name Format | [redacted] | Date of Birth | [redacted] |
| | Baby | $ 99.00 | |

Total Amount $ [redacted]
Taxes and Surcharges Included

Special Requests

[redacted]

SEBRING LAKE ESTATES MHC, LLC
26420 BROADWAY AVE, LOT #69
OAKWOOD VILLAGE • OHIO • 44146
PH (440) 543-8000 • FAX (440) 543-8004

# Rules & Regulations for Sebring Lake Estates MHC, LLC

**Purpose**

The purpose of these rules is to ensure our residents enjoy the quality of life they deserve; to promote the peaceful occupancy, convenience, safety and general welfare of the residents of Sebring Lake Estates MHC, LLC, protect the community and its facilities from abuse; and, to make a fair distribution of service and facilities of the community.

**1. Applicability**

The following guidelines, applying to homes and spaces, their occupants, visitors and guests, are herein agreed to by Tenant and Lessor of Sebring Lake Estates MHC, LLC.

**2. Applications; Rental Fees; and Security Deposits**

a. An application, fully completed, must be submitted by the prospective tenant and approved prior to occupancy. The application must contain the names of all prospective residents who will be living in the mobile home.
b. Rental fees and any applicable water-sewer charges are due and payable on or before the first day but not later than the fifth calendar day of every month.
c. Rent and any applicable water-sewer charges shall be paid in a manner determined by the Lessor, Sebring Lake Estates MHC, LLC.
d. A security deposit equal to one month's rent shall be made by the prospective tenant and held by the Lessor until the home is sold or moved.
e. A background and credit history check is required for all residents
f. Subletting (or sub-renting) is not permitted.

**3. Rental Fees; and late charges**

a. If rent payments are received beyond the fifth day of any month, a late charge in the amount of $25 shall be charged and $5 per day thereafter, until the 15th day after which legal action may be initiated.
b. There will be a charge of $35 for any check that is returned by the bank for insufficient funds.

Testing 66-1660

# FAX

*Date* [illegible]

*Pages* [illegible]

*Subject* [illegible]

| | |
|---|---|
| *To* | *From* [illegible] |
| *Organization* | *Organization* |
| *Fax Number* [illegible] | *Fax Number* |
| *Phone Number* | *Phone Number* [illegible] |
| | *Email* [illegible] |

*Comments*

[illegible]

Fax Finder

If you received this in error or would like to opt-out, please call [illegible] fax [illegible] or email

TEST3__DOCX

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| 4 | 2 |
| 3 | 3 |
| 2 | 4 |
| 1 | 5 |

emak.tech

# FAX
COVER SHEET

**TO** 18553301239

**FROM** EMAK Tech Fax (7162426374)

**SUBJECT** Test

TEst

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aoljepjwioef
eoljewaf
aw;eofjweopjafo
aoljepjwioef
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# Alain Sierra

228 Cornelia Street Apt 3 Brooklyn, N.Y 11221 alain.sierra@icloud.com Cell# (347) 326 0097

**Objective**

Eager to a career that will demonstrate my abilities and utilize my skills w than a company that offers opportunity for growth

**Qualifications**

Photographer Interior Design, Customer Service Administration, Retail

**Skills**

- Microsoft Word Microsoft Excel Microsoft Outlook, PowerPoint
- Photography Adobe Photoshop Lighting and Composition
- Wa ve, AS400 Great Plains, Omega Aims Pro-Fax, Z-Rake data base systems

## Work History

08/12 - 08/13 Digital Portraits Inc New York NY

*Photographer / Photo Editor*

- Edited photos using an Adobe Photoshop to meet clients deadlines
- Would set up lighting and staging for photo shoots
- Directed and positioned clients models throughout photo shoot.
- Involved in photo selection and enhancement of the final photograph.
- Photographed headshots for models and children also photographed catalogs followed by any project assigned

02/08 – 12/11 Mc Cluskey Design Group New York NY

*Administrative Assistant*

- Assisting senior designers sealing presentation boards for projects in Hospitality Residential and Commercial design projects
- Organizing meetings with vendors about existing and new textile product information relating to interior design.
- Maintaining company library up to date on all products needed for assignments photograph all project designs

01/02 - 10/07 Ampirom Map Corporation Queens, NY

*Customer Service Representative*

- Processing orders for clients and sale representatives, distributes of guides and maps
- Responsible managing sales for retail vendors regarding pricing purchase orders and billing
- Track and ship orders via UPS USPS Fed Ex, and other carriers according to vendors manuals.
- Updating new accounts into database and working on weekly product knowledge reports
- Processing daily and monthly transactions report and updating weekly inventory

**Education**

Fashion Institute of Technology

Major: Photography Date: September 2010 thru May 2012

**Languages**

Fluent in English and Spanish

## EMPLOYMENT **HISTORY**
(CONTINUED)

SEP 08

**ALTIA** (6 MONTH CONTRACT)
In-house Designer

- Designed marketing collateral for client events

JUL 06

**AFDGEE COMPONENTS** (1 YEAR 7 MONTHS)
In-house Graphic Designer

- Worked on designing and maintaining the website. The website had a high level of income
- Designed product instructions, packages and advertising
- In charge of their weekly newsletter
- Created a guide to direct clients and education

## PROFESSIONAL **SKILLS**

- Well organized. Love to build a process and get everyone on board with it
- Able to juggle many different projects at once
- Determined. I love to excel. I like to meet deadlines
- Able to engage with users and create intuitive designs
- Love to collaborate with others to come up with creative solutions
- Experienced with digital tools. I have a basic understanding of how they work

## SOFTWARE **SKILLS**

PHOTOSHOP CC

ILLUSTRATOR CC

INDESIGN CC

FLASH CC

DREAMWEAVER CC

PREMIERE CC

GOOGLE WEB DESIGNER

FLARE BUILDER

MICROSOFT OFFICE

test

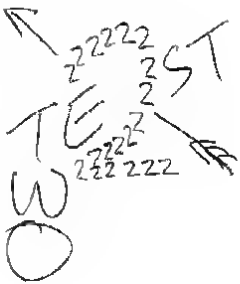
TEST

Jessica

# Sending Confirm

Date : 2022-6-2018 THU 11 51
Name
Tel.

| | |
|---|---|
| Phone | : 15032900390 |
| Pages | : 1 |
| Start Time | : 08-01 11 51 |
| Elapsed Time | : 0'36" |
| Mode | : 03 |
| Result | : Send Error |



Hello

Internet!

HP Officejet V Series V40xi
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Log for
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2122159492
Oct 09 2010 5 17PM

Last Transaction

| Date | Time | Type | Identification | Duration | Pages | Result |
|---|---|---|---|---|---|---|
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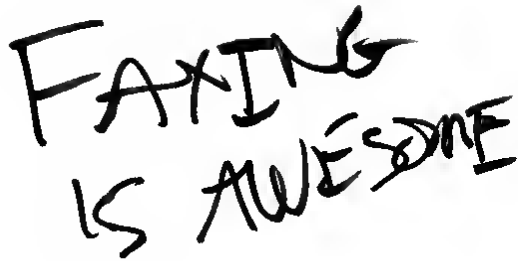

Just a test file

Its K'von mom

**NE PA COMMUNITY FEDERAL CREDIT UNION**
935 Clay Avenue
Stroudsburg, Pennsylvania 18360
(570) 421-5585

Member Services Fax No. (570) 421-5476
Administration Fax No. (570) 421-5288

## FACSIMILE COVER PAGE

DATE. _____

TO: _____

FAX NUMBER. _____

FROM: This is a Test

NUMBER OF PAGES (including this cover page) _____

DESCRIPTION OF MATERIALS SENT: _____

_____

SPECIAL COMMENTS/MESSAGE: _____

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MEDICAL SYSTEM

**To** **855-330-1238**
Company
Fax 855-330-1239
Phone

**From:** **Ed Furlong**
Fax
Phone
E-mail edwardfurlong@umm.edu

**NOTES:**

PP

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Date and time of transmission: 9/13/2015 4:18:44 AM
Number of pages including this cover sheet: 1

Advanced THERMAL IMAGING

120 S. Hamilton St
Marshall, MI

# MARK YOUR CALENDARS!!

**Turtle Dove HCW is excited to announce our collaboration with Julie Bennett, CTT from Advanced Thermal Imaging of WM**

## APRIL 27

**Julie will be offering Medical Infrared Imaging (thermography) at our Center**

### What is Thermal Infrared Imaging?

Infrared imaging, known as thermography, is specific evaluation of skin temperature patterns, which may reflect normal or abnormal functions of the body. Extremely sensitive infrared cameras and sophisticated computers detect and produce high-resolution images of changes in the surface of the body. Thermography is completely safe, painless and extremely effective, not requiring radiation or contact with any body tissues. It has proved helpful in the adjunctive assessment of breast cancer, diabetes, headaches, neck and back problems, arthritis, soft tissue injury, and other physical problems.

Breast thermography Offers

- It detects the earliest signs that a breast cancer may be forming
- Individualized breast cancer risk assessment
- A possible role in breast cancer prevention
- Imaging for younger women

Pricing

| | |
|---|---|
| Breast | $200 |
| Thyroid | $ 90 |

Space is limited, so call soon to reserve your spot or to get more information! 269 781 6417

Job

Test

Fax!

lower extremities

Psychiatric: Normal mood and affect. Normal insight and judgment.

Musculoskeletal

Head and Neck: Normocephalic and symmetric. Normal range of motion. No tenderness to palpation and range of motion. Good motor control and strength. Laxity, level: normal.

Spine/Ribs: Spine is essentially straight. Physiologic degrees of kyphosis and lordosis. Spine is flexible with minimal laxity. No palpable deviations and/or injury sites. Strength is normal. No pain to palpation. Ribs are symmetric with no defects.

UE's: Normal range of motion, including passive ROM, normal strength, bulk, and tone. Normal dexterity levels. Strength and control is appropriate for size.

LE's: Lengthening are equal. Gait is normal. Coronal plane alignment is normal. Joints are stable and symmetric. ROM is normal. ROM is normal (see below).

Hips: Hips are stable with a full range of flexion and extension, abduction. No tenderness with range of motion. Alignment is symmetric. Strength in musculature is normal.

Knees: No effusion. Patellofemoral tracking normal. No tenderness with palpation of quadriceps tendon and patellar tendon. Stable to varus and valgus stress. ROM full. No tenderness along the joint line. No contracture.

Feet: Normal appearance. No visible deformities. Stable, pain free ranges of motion. No tenderness to palpation.

Neuro: Neuromuscular exam is normal, including peripheral versus central sensitivity and motor function.

Radiographs:

Impression:

Plan:

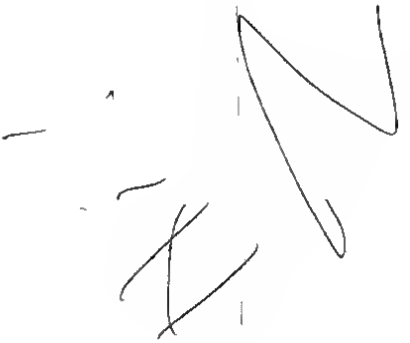
Patrick Henderson, MD

**In summary:** Unfinished Wo Diagnosis

Is this
Working?

Testing. Did you read this message?

FedEx. FedEx. FedEx. FedEx. FedEx. FedEx.



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Month Year

## 3 ORDERING INFORMATION

| Quantity | Item Number | Name of Item Description | Price Each | Total Price |
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* Item not over for additional order(s) needed

Please check this box if you have items on the other side.

Yippee!!! FREE SHIPPING! USA & Canada! ($75 Minimum)

CANADA
New Brunswick 15%
Nfld./Labrador 15%
Nova Scotia 15%
Ontario 13%
PEI 15%
Others 5%

USA
South Carolina 6% sales tax
Add your City/County Tax

7% of Merchandise Subtotal
Minimum $20 Maximum $100

Shipping & Handling
USA & Canada ($75 Minimum) FREE!
USA & Canada (Below $75) $7.50
International Actual Cost (Est. 40%)

| | | |
|---|---|---|
| 4 | Subtotal (This Side) | |
| 5 | Subtotal (Other Side) | |
| 6 | Merchandise Total 4 and 5 ($75 minimum) | |
| 7 | Taxes (NC/Canada) | |
| 8 | Customs/ Brokerage (Canada Only) | |
| 9 | Shipping & Handling | FREE |
| 10 | TOTAL US Funds only! | |

For SD Use Only
Order #
DT _____ IN _____
CK _____ AM _____

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# FaxBack System Test

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**www.hpshopping.com**
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# fax

| | |
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| *To* | **<8888771655>** |
| *Fax Number* | 8888771655 |
| *From* | **roybo y** |
| *Fax Number* | |
| *Business Phone* | |
| *Home Phone* | |
| *Pages* | 1 |
| *Date/Time* | 4/6/2014 10:39:46 AM |
| *Subject* | test |

test

H I
P A T

Test Fax

The great datacenter upgrade of 2014

**Print Quality Check**

Check that the slanted lines forming the four color blocks are all visible with no gaps. If OK select (Yes) on the control panel. If gaps are visible select (No) on the control panel to start the cleaning process and follow the prompts on the LCD.

TEST

FAX

# Workout Calendar

Just put and X through each day as you complete it.

| MONTH 1 | | | | | | |
|---|---|---|---|---|---|---|
| 1 Fit Test | 2 Plyometric Cardio Circuit | 3 Cardio Power & Resistance | 4 Cardio Recovery | 5 Pure Cardio | 6 Plyometric Cardio Circuit | 7 Rest |
| 8 Cardio Power & Resistance | 9 Pure Cardio | 10 Plyometric Cardio Circuit | 11 Cardio Recovery | 12 Cardio Power & Resistance | 13 Pure Cardio & Cardio Abs | 14 Rest |
| 15 Fit Test | 16 Plyometric Cardio Circuit | 17 Pure Cardio and Cardio Abs | 18 Cardio Recovery | 19 Cardio Power & Resistance | 20 Plyometric Cardio Circuit | 21 Rest |
| 22 Pure Cardio & Cardio Abs | 23 Cardio Power & Resistance | 24 Plyometric Cardio Circuit | 25 Cardio Recovery | 26 Pure Cardio & Cardio Abs | 27 Plyometric Cardio Circuit | 28 Rest |
| **RECOVERY WEEK** | | | | | | |
| 29 Core Cardio & Balance | 30 Core Cardio & Balance | 31 Core Cardio & Balance | 32 Core Cardio & Balance | 33 Core Cardio & Balance | 34 Core Cardio & Balance | 35 Rest |
| **MONTH 2** | | | | | | |
| 36 Fit Test & Max Interval Circuit | 37 Max Interval Plyo | 38 Max Cardio Conditioning | 39 Max Recovery | 40 Max Interval Circuit | 41 Max Interval Plyo | 42 Rest |
| 43 Max Cardio Conditioning | 44 Max Interval Circuit | 45 Max Interval Plyo | 46 Max Recovery | 47 Max Cardio Conditioning & Cardio Abs* | 48 Core Cardio and Balance* | 49 Rest |
| 50 Fit Test & Max Interval Circuit | 51 Max Interval Plyo | 52 Max Cardio Conditioning & Cardio Abs* | 53 Max Recovery | 54 Max Interval Circuit | 55 Core Cardio and Balance* | 56 Rest |
| 57 Max Interval Plyo | 58 Max Cardio Conditioning & Cardio Abs* | 59 Max Interval Circuit | 60 Core Cardio and Balance* | 61 Max Interval Plyo | 62 Max Cardio Conditioning & Cardio Abs* | 63 Fit Test |

*If you have the DELUXE package you can replace CARDIO ABS with INSANE ABS, and CORE CARDIO AND BALANCE with MAX INTERVAL SPORTS TRAINING.

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TEST

FROM CAUNA C

3/31/12 3:44 PM

Faz Wed July 15th 2014 672378736748270009037678J2

1-713-294-284-3

1800FJP5J84DC

testing faxing

testing

happy day to us!

Andy Boyle

To: Anthony Landi
Subject: RE: Test Fax Numbers

# TEST FAX, PLEASE NOTIFY ANTHONY LANDI AT NUMBER BELOW WHEN YOU RECEIVE THIS FAX.

# IF YOU DO NOT RECEIVE THIS FAX...NOTIFY HIM ANYWAY!!

From: Anthony Landi
Sent: Tuesday, December 16, 2014 2:05 PM
To: Andy Boyle
Subject: Test Fax Numbers

As discussed on the phone, here are the numbers to send the test faxes to

- 580-748-1580
- 580-234-4401
- 859-[illegible]1239

Thank you Andy!!

**Anthony Landi**
System Administrator
800.230.0142 (Toll Free)
717.491.7334 (Direct)
www.SecurityPartners.com

Security Partners

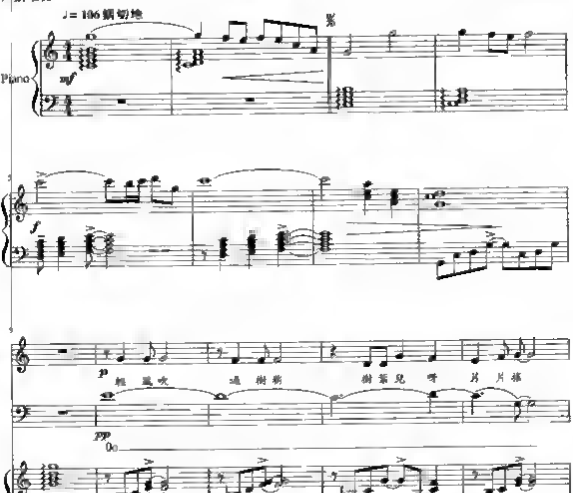
BOO YAH

# 風和愛

Wind And Love

作曲 王雅玲
編曲 吳文綱

作詞 梁靜心
鋼琴 鍾岸忱



# Garantía Limitada Brother™ (Versión Internacional)

**Quién está cubierto**

Esta garantía limitada ("garantía") se otorga únicamente al usuario del producto consumidores y organismos gubernamentales adquiridos en una distribuidor nuevo "sello Producto") y no cubre más para productores legítimamente a través de los distribuidores y representantes autorizados de Brother ("Distribuidores Autorizados") en los legítimamente territorios Antigua/Barbuda, Anguila, Aruba, Barbados, Bermuda, Bahamas, Belice Caimán, Costa Rica, Islas Malvinas República Dominicana, Ecuador, Salvador, Guatemala Guyana, Islas Jamaica, St. Christopher y Nevis, Islas Caimán, St Lucía, Nicaragua, Panamá, Puerto Rico, Surinam, Islas Turcas y Caicos, Trinidad y Tobago, Islas Vírgenes, americanos y los este Virgenes de Estados Unidos.

**Qué tiene cubierto**

Esta garantía cubre una persona consumidores y normales. Los consumidores y organismos indican para los países referidos a los organismos gubernamentales de cinco años a partir de la fecha de compra.

Si usted no se indique lo contrario, en este documento, "organismo gubernamental" significa cualquier autoridad, agencia, rama o división de un gobierno federal, estatal, provincial, municipal o territorial, con alcance en el territorio de aplicación.

El nombre de Brother usted poseído por el nombre del Distribuidor Autorizado dentro del territorio en el que se compró el producto.

**Cuál nos cubrimos en los reparten es solamente**

- La persona original para una Brother indicada en nuestro sitio web http://www.brother.com/warranty/.

Esta persona de la fecha de compra del producto el Distribuidor Autorizado nuestro sello Producto. Usted tenga un cargo quiere la garantía supplier a date. En este caso original el plazo servicio de garantía será. Toda garantía extendida que sea posterior por el distribuidor o representante de una extensión esta responsabilidad exclusiva de distribuidor o comunidad. Podría por lo que BROTHER no se será responsable por las responsable y garantías extendidas que usted adquiera.

**Qué NO nos extienden**

Esta garantía que la legislación nacional no permita, con ninguna de estas las partes o consumidores nacionales, entre otros, por los siguientes supuestos:

(1) Daños Brother a este Producto

(2) Daños causados por utilización incorrecta, uso inadecuado o accidental, real uso, negligencia o accidente (incluyendo pero no limitado la manipulación de este producto de cualquier naturaleza no permitida).

(3) Daños causados por otro dispositivo o componente utilizado con este Producto (incluyendo pero no

extienda daños ocasionados por partes y consumibles y accesorios de Brother).

(4) Problemas causados de usar cualquier substancia o accesorios a menos de agua.

(5) Consumibles y accesorios mientras no correspondan con el uso especificado.

Esta garantía limitada no será de un solo producto en más alcance a modificación no autorizar mientras Brother no haya aprobado por escrito, de la producto Autorizado servicio o uso.

El la cláusula de responsabilidad y garantías declinaciones en esta garantía no será aplicable en la medida en que la ley prohíba la exclusión por el derecho de usar de la medida en la legislación aplicable, en tal caso, la exclusión será aplicable únicamente a los daños, pérdidas o gastos prohibidos.

Los consumibles son: cintas y cartuchos impresión tinta genuina.

**Qué nos cubrimos también nuestro reparten te solución**

Cuando una consumo de consumidores en legislación por Brother, y antes en solicitud le proveer a su nombre de Brother, el Centro de Centro de Brother distribuidor de extienda una cubre Máquina de consumidor producto de Tener Brother que en Brother. En la medida que de consumidores proveer la parte, la cubre en de consumidor que Brother (esto así con desarrollando a la consumidor) Usted nombre bajo el nombre del nuestro de partes de la Brother servicio los nuestros este tiene (RE) esta solicitando. Estos consumidor al Estados servicio a partes y en consumidor Brother Brother que consumidores consumidor y una cubre del recibo de consumidor Brother por el consumidor.

**Qué hará Brother**

En el problema solicitamos de reparar o no evaluará este producto o accesorios incompatibles y nada servicio por esta garantía y el tenían nuestro servicio el producto a nuestro a a un Centro de Servicio consumidor. Usted más durante de nuestro reparación, nuestro a un Centro de Servicio consumidor. Brother a consumidor la consumo un consumidores a consumidores consumidor en el cobro partes a partes en el nuestro de este de cargo de consumidor nada ya hará vere un bien sustancialmente igual al extienda. Si, iran un nuestro de partes legítimamente no superior al mismo comprador por el consumidor. Nos, nuestro no puede reparar o reemplazar el producto como no garantías, un reparticuard el cobro el nuestro de la compra, puede nuestro del producto a Brother Brother en nuestro el consumidor de nuestro un consumidor consumidores a no consumidores de consumidores y accesorios consumidores y consumidores consumidores y utilizar partes consumidores Brother y nuestro Brother nuestro este consumidor, con del consumidor del Servicio de nuestro producto.

**Cómo obtener el servicio de garantía**

Para obtener el servicio de garantía, el comprador debe comunicarse con un Centro de Servicio Autorizado de Brother dentro del territorio de aplicación durante el período de garantía. Para localizar el Centro de Servicio Autorizado más cercano, el comprador puede llamar al número de teléfono que aparece en la lista de Centros de Servicio Autorizados de Brother que se encuentra en el sitio web de Brother correspondiente a su país de residencia, que puede encontrar en http://www.brother.com/. El comprador también puede comunicarse con Brother a través del sitio web correspondiente a su país de residencia para obtener información sobre cómo encontrar un Centro de Servicio Autorizado de Brother.

El comprador debe presentar una prueba de compra (como una factura de venta) y el producto completo que se desea reparar o reemplazar. El comprador también debe completar el formulario de solicitud de servicio de garantía cuando se comunique con el Centro de Servicio Autorizado de Brother.

**Limitaciones**

Brother no se responsable por daños o pérdidas de ningún tipo, incluso daños consecuenciales, accesorios o incidentales, relacionados con la venta posterior. Usted no el mismo según descrita antes, y no el resulte que el producto no cumple con la garantía. Brother no será responsable por ningún incumplimiento de esta garantía causado por circunstancias fuera de su control. Brother no será responsable por ningún daño o pérdida causados por el uso de este producto con cualquier dispositivo o software no autorizado. Brother no será responsable por ningún daño o pérdida causados por el uso de este producto con cualquier dispositivo o software no autorizado. Brother no será responsable por ningún daño o pérdida causados por el uso de este producto con cualquier dispositivo o software no autorizado.

**Cómo hacer el servicio que es Producto no elegible cada semana bajo la Brother:**

Los extienda para hacer servicio la Brother. Antes solicitando por la nuestro de servicio comprador Brother. Para obtener estadísticas antes al usted de servicio consumidor nuestro este certain, condiciones en su este por Usted de nuestro otro Web-http://www.brother.com/. Usted a específicamente o a través del siguiente número: 866-592-7999.

**Esta la garantía servicio que bajo:**

Usando de nuestro servicio o los Centro de Nuestro Autorizado, no lo puede nuestro comprar o consumo (consumidor) por lo a nuestro Brother a servicio consumidor Autorizado. Brother Centro de Servicio Autorizado para una Autorizado de no servicio En el nuestro que el siguiente consumidor nuestro usted es responsable por el nuestro los envío, empaque de nuestro y de nuestro. Usted también es responsable por nuestro a partes a cada nuestros consumidor el nuestro, por unos reconocimiento el extienda de producto.

**Qué hará Brother:

Neutral atom LASER
HeNe gas
Brewster mirror
mirror
1,000+ε
30,000 V
-
+

Wednesday July 30, 2014

Name: Mary's Room Hotel & Suites
Fax: +1(555)-555-5555
Attn: Ajesh Patel
Subject: Room Reservation

| Reservation Confirmation |
| --- |
| PA0001-2200-300 |
| Created: 07/30/2014 2:47:05 GMT |
| Booking Source: Standard |

Dear Ajesh Patel,

Thank you for the [illegible] reservation at your property. Please review the following information. If you have any questions or concerns, please contact us at our toll-free number (555) 555-5555 or via e-mail at reservations@insight.com.

Sincerely,
Mary's Room

## Guest Info

| | | | |
| --- | --- | --- | --- |
| Booked By: | Travel Booking | Rate: | Standard |
| Address: | Default | Postal Code: | 2234234 |
| City: | Bethlehem | Country: | USA |
| Email Address: | mfrivierre-dudebag@insight.com | Telephone Number: | 8787776867 |

## Billing Information

| | | | |
| --- | --- | --- | --- |
| Card Type: | Visa | Expiry Date: | 07/2014 |
| Card Number: | 4024.1111.0000.1000 | Amount: | $67.00 |

## Room Details

| | | | |
| --- | --- | --- | --- |
| Number of Rooms: | 1 | Number of Nights: | 1 |
| Check-In Date: | August 13, 2014 | Check-Out Date: | August 14, 2014 |

## Guest(s) Details

| First Name: | Test | Last Name: | Test |
| --- | --- | --- | --- |

| Room Details | Color | Reg 03 |
| --- | --- | --- |
| | Bed | $60.00 |

Sub-Total: $60.00
Tax (13.00%): $6.11 — Fees ($0.00) — Total: $67.00

Cancellation Policy

Please note that if you cancel your reservation, or fail to show up for your stay, a charge equal to the first night's room rate will be applied to your credit card. A cancellation must be received at least 24 hours prior to your scheduled arrival time in order to avoid this charge. Please note that if you cancel your reservation or fail to show up for your stay, a charge equal to the first night's room rate will be applied to your credit card. Thank you.

Thanks for choosing Insight Corporate Headquarters

6120

NEW FAX #

HP Officejet Pro 8600 N911g Series

Fax Log for
Spectrum Paint Co.
485 37, 2723
00-00-00 00:00AM

**Last Transaction**

| Date | Time | Type | Station ID | Duration | Pages | Result |
|---|---|---|---|---|---|---|
| | | | | Digital Fax | | |
| 00 00 | 00:00AM | Fax Sent | [illegible]5-330 1239 | 0 28<br>N/A | 1 | OK |

Test FAX

1-415-529-2147

11/16/2016

**BUREAU OF MOTOR VEHICLES**
**BILL OF SALE**
Plain Form #4237 (R. 2-99)

In consideration of $_____ the receipt of which is hereby acknowledged

_____
(Seller)

hereby sells, transfers and conveys all rights in the following personal property

| Year | Make |
|---|---|
| Identification number | |
| Registration number (watercraft only) | |
| To: Name | |
| Street address | |
| City | |
| State | ZIP code |

The seller certifies that the Vehicle / Watercraft is not subject to any security interest or lien that are the responsibility of the seller

The seller has executed this Bill of Sale the _____ day of _____ and additionally makes the following statement
I swear or affirm that the information I have entered on this form is correct.
I understand that making a false statement on this form may constitute the crime of perjury

Name of seller

Name of seller

Name of seller

Name of seller

**BUREAU OF MOTOR VEHICLES**
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Name of seller

Name of seller

Name of seller

Name of seller

TEST

# How to test a fax machine – 02

## How Can I Test My Fax Machine?

*I just hooked up a new fax machine and I'd like to test it just to make sure it works. How can I do that?*

Presumably you want to test your fax machine by sending a fax from it and receiving a fax with it. Here's how to do both:

**To test the send functionality of your fax machine,** send a one page fax to 1-855-329 1239 (a toll free number in the United States.) When it's finished transmitting, point your web browser to Fax Toy — it's a fun web site that displays whatever is faxed to that number. Within a minute, your fax should appear on the site. Click the thumbnail to see a large version.

**To test the receive functionality of your fax machine,** point your web browser to FaxZero. This site lets you send faxes for free to anywhere in the United States and Canada. Within a few minutes, your fax machine should ring — hopefully, it will automatically answer and spit out the test fax.

=== COVER PAGE ===

TO: _____

FROM: _____

FAX:

TEL:

PAGE[S] TO FOLLOW

COMMENT:

Robinson

Eye

JAKE TEST

2

8410

Test!

TEST

This is a sample text document

AUTOPART INTERNATIONAL

# FaxMessage

Date 3/6/2014
To Test
Fax. 18889771655
From
Re test

Test fax from Circuit ID

HP Photosmart C7200 All-in-One series

Fax Log for
Greenhill Farm
502-222-9851
Oct 30 2011 11:58AM

Last Transaction

| Date | Time | Type | Station ID | Duration | Pages | Result |
|---|---|---|---|---|---|---|
| Oct 30 | 11:57AM | Fax Sent | 15026050437 | 0:37 | 0 | Error 388* |

* A communication error occurred during the fax transmission. If you're sending by again and/or call to make sure the recipient's fax machine is ready to receive faxes. If you're receiving, contact the initiator and ask them to send the document again.

Note:

Image on Fax Send Report is set to Off

An image of page 1 will appear here for faxes that are sent as Scan and Fax

## Page Counter

Serial No. G445P801422

Date of Today Dec. 21,2015 06:03 PM

| | |
|---|---|
| Copier:Color | 0 |
| Copier:B & W | 0 |
| Printer:Color | 0 |
| Printer:B & W | 0 |
| Color Total | 0 |
| B & W Total | 0 |

Please FAX to

## Prover to St. Joseph over 1900 years old

**O St. Joseph whose protection is so great, so strong, so prompt before the Throne of God, I place in you all my interests and desires O St Joseph do assist me by your powerful intercession and obtain for me from your Divine Son all spiritual blessings through Jesus Christ, Our Lord; so that having engaged here below your Heavenly power I may offer my Thanksgiving and Homage to the most Loving of Fathers. O St. Joseph, I never weary contemplating you and Jesus asleep in your arms I dare not approach while He reposes near your heart. Press him in my name and kiss His fine Head for me, and ask Him to return the Kiss when I draw my dying breath. St. Joseph, Patron of departing souls, pray for us. Amen**

***Say for nine consecutive mornings for anything you may desire. It has***

***seldom been known to fail.***

**This prayer was found in the fiftieth year of Our Lord Jesus Christ. In 1500's it was sent by the Pope to Emperor Charles when he was going into battle.**

**Whoever reads this prayer or hears it or carries it, will never die a sudden death, nor be drowned, nor will poison take effect on them They will not fall into the hands of the enemy nor be burned in any fire, nor will they be defeated in battle**

**Make this prayer known everywhere.**

Imprimatur
Most Rev George W Ahr
Bishop of Trenton

#SETHRICH

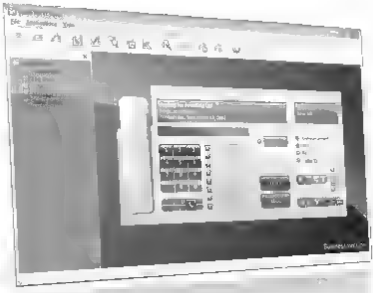
Thank
You

Test

www.ventafax.com
single user and network solutions
www.venta4net.com
Transmitted with unregistered version of Venta Fax & Voice
7/10/2012 5:08:37 PM From Fax ID Page 1/ 1
Attn To

# VentaFax® 6

## Fax and Answering Machine for Windows



VENTA

© Venta Association 1997—2011

www.ventafax.com
Official Support Server
E-mail support@ventafax.com

Sent with VentaFax software www.ventafax.com

# Expressions Inc

## Canvas Price Guide

| Size | Gallery Wrap | Stretched & Framed |
|---|---|---|
| 12x12 | $24 | $88 |
| 12x16 | $29 | $94 |
| 16x20 | $39 | $80 |
| 18x24 | $49 | $78 |
| 22x28 | $65 | $94 |
| 24x30 | $74 | $100 |
| 24x36 | $84 | $115 |
| 36x36 | $125 | $152 |
| 36x48 | $150 | $179 |

To access our new line of canvas use the following links.

To use links below *Hold down Ctrl button and click link

Birds/Butterflies
http://us.fotofo.com/G...

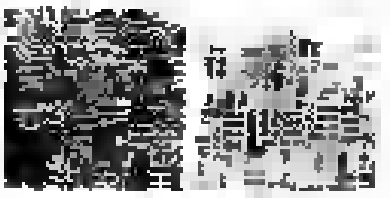
Leaves/Flowers/Foliage
http://us.fotofo.com/G...

Lake/Canvas
http://us.fotofo.com/G...

Landscapes
http://us.fotofo.com/G...

Animals
http://us.fotofo.com/G...

hot women



y and Cookies

Advertise

About our ads

Help

Feedback

[Emotional, Behavioral or Cognitive Conditions and Complications]

Dimension IV
(Readiness to change)

Dimension V
(Relapse, Continued Use or Continued Problem Potential

Dimension VI
(Recovery/living environment)

Counselor Signature

[redacted]

T[redacted] Nash,SA

[redacted]

Date Signed
8/17/2017

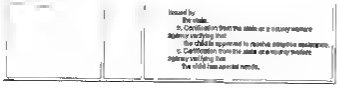
Supervisor Signature

Reginald J Persinger Clinical Supervisor

Date Signed
8/17/2017


Confidentiality statement

Information contained on this facsimile and the documents accompanying it are protected by Federal confidentiality rules (42 CFR part 2). The Federal rules prohibit you from making any further disclosures of this information unless it is expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by 42 CFR part 2.


Issued by
the state
a. Certification that the state or a notary-signature
agency certifying that
the child is approved to receive adoption assistance
c. Certification from the state or a notary-public
agency certifying that
the child has special needs.

TEST

TEST

FAX

Breton

B.P

HP Officejet 6500 E709a All-in-One series

Fax Log for
Amy Schooler
5525060614
Feb 06 2010 9:26AM

Last Transaction

| Date | Time | Type | Station ID | Duration | Pages | Result |
|---|---|---|---|---|---|---|
| | | | | Digital Fax | | |
| Feb 6 | 9:25AM | Fax Sent | 18884732983 | 0:25<br>N/A | 0 | Error 321* |

*A communication error occurred during the fax transmission
If you're sending, try again and/or call to make sure the recipient's fax machine is ready to receive faxes. If you're receiving, contact the initiator and ask them to send the document again

Note

Image on Fax Send Report is set to On

An image of page 1 will appear here for faxes that are sent as Scan and Fax

## Network Information

| | | |
|---|---|---|
| Status | = | Not Connected |
| Host Name | = | NPIA3A43B |
| Hardware Address | = | a4:a3:c1:4E:4a:5c |
| Network In Use | | None |
| Total Packets Received | = | 0 |
| Bad Packets Received | = | 0 |
| Framing Errors Received | = | 0 |
| Total Packets Transmitted | | 0 |
| Unsendable Packets | = | 0 |
| Transmit Collisions | = | 0 |
| Transmit Late Collisions | = | 0 |
| IP Address | = | 0.0.0.0 |
| Subnet Mask | = | 0.0.0.0 |
| Default Gateway | = | 0.0.0.0 |
| Domain Name | = | |
| Bonjour Service Name | = | |
| HP Color LaserJet Pro MFP M177fw [A3A43B] | | |
| Bonjour Primary Name | = | [NPIA3A43B.local] |
| IP Configured by | = | DHCP |
| DHCP (DCHP) Server | | 0.0.0.0 |
| WINS Server | = | 0.0.0.0 |
| IPv6 | = | Enabled |
| IPv6 Local address | = | |
| IPv6 Stateless Address | = | |
| IPv6 DHCP Address | | |
| Primary Gateway Address | = | fe80::a3c1:4eff:fe4a:5c%1 |
| 802.11b/g/n Wireless | | |
| Status | = | Disabled |
| Communication Mode | | Infrastructure |
| Network Name (SSID) | | |
| Authentication | = | None (Open) |

## Fax Settings

| | | |
|---|---|---|
| Default Resolution | | Fine |
| Default Lighter/Dark | | < ---^--- > |
| Default Glass Size | = | Letter |
| Dialing Mode | = | Tone |
| Redial On Busy | = | On |
| Redial On No Answer | = | On |
| Redial On Comm Error | | On |
| Dial Prefix | | Off |
| Pulse Dial Type | = | 60% |
| Answer Mode | = | Manual |
| Rings To Answer | | 4 |
| Answer Ring Type | | All Rings |
| Extension Phone | | On |
| Silence Detection | | Off |
| Fit To Page | = | On |
| Stamp Received Faxes | = | Off |
| Forward Fax | | Off |
| Block Faxes | = | On |
| Private Receive | = | Off |
| Reprint Faxes | = | No |
| ECM | Error Correction | = | On |
| Fax Speed | = | Fast(V.34) |
| Phone Line Volume | = | Medium |
| Alarm Volume | | Medium |
| Ring Volume | | Medium |
| Key Press Volume | | Medium |
| Fax Confirmation | | Never |
| Fax Error Report | = | On Send Error |
| Include First Page | | On |
| Auto Fax Printing | | On |
| 1:1 3D Trace Printing | = | Never |
| Company name | = | HPFAX |
| Tax number | | |

Font: Jeff Email: DPCell: WTM=78 DPM=2814, 26
CT 0:15 4:51 00 9:151:22 1:12 06
PM 11 35 53 84 03 41 130 12 39 60 30 123 147 84 8 18 48 73 112 128 143 0 12 62 18C 48 177 280

TEST

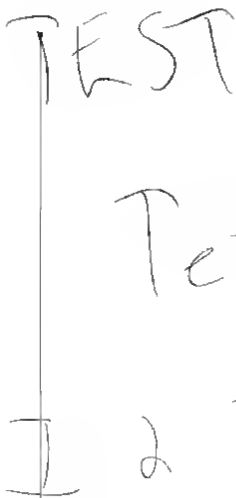
1-855-330-1239

1-213-294-2943

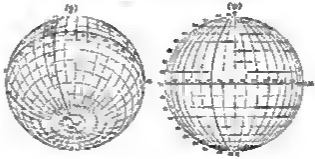
# THE INTELLIGENT INVESTOR

THE DEFINITIVE BOOK ON VALUE INVESTING

BENJAMIN GRAHAM


TEST
Test
I 2 3

Random Stuff Sent From Your Fax Machine
Fax something interesting to 1 510-545-9999



Electrical

Lighting

Led

Fluorescent

Hid

Metal Halide

High Pressure Sodium

HPS

Incandescent

Par Floods

Service Change out

Photo cell

Time clock

Contactor

Maintenance

Welding

Power washing

~~Painting~~

Painting

Facility Maintenance

Window Washing

Glass Replacement

Janitorial

Dust Mop

Sweeping

Clean out

Vacancy Clean

Trash Pickup

Power Wash

Window washing

Window wash

Window Clean

# New Employee Setup/Maintenance Form

**Company Name:** **Client No.**

First Name | MI | Last Name

Address | Status | Dep# | Empl# | Pay Freq

Address2 | Sex | Job Title | Clock#

City | ST | Zip | Home Phone

Social Security # | Birth Date | Hire Date

E-mail address | REQUIRED

**Double-Boxed areas are *MANDATORY.***
Incomplete information could result in a PENALTY to Employer from the State Agency

| Hourly Rate | Salary | Employment Status (Circle One) |
|---|---|---|
| Rate1 _____ | Salary: $_____ | Full Time 1099-EIC |
| Rate2 _____ | | Part Time |
| Rate3 _____ | | 1099-MISC |

**Voluntary Deduction** **Amount per Check** **Balance (Goal)**

_____ _____ _____ _____ Tax Status:_____

_____ _____ _____ _____ Local tax_____

_____ _____ _____

* *Child Support and Garnishments must have Court Order attached.*

**Fed Filing Status :** Married _____ Single _____ # exemptions _____ Add'l W/H ____

**State Filing Status:** Married _____ Single _____ #exemptions _____ Add'l W/H ____

**Acct*** **Bank Acct #** **Bank Routing #** **Type Acct**

_____ _____ _____ Chk/Sav

_____ _____ _____ Chk/Sav

* *Please indicate amount for deposit – 100% net or partial net indicate dollar amount*
***Voided check must be included with form***

NORTHWEST ARKANSAS PATHOLOGY ASSOCIATES, P.A.
3890 EAST LONGVIEW STREET FAYETTEVILLE AR, 72703 (479) 442-0346

Gynecological Cytology Report

NORTHWEST ARKANSAS PATHOLOGY

| Patient Information | Physician Information | Accession # 20152 |
|---|---|---|
| Name Amber Burnett<br>Age 56 Sex Male<br>DOB 05/17/1960<br>Medical Record 606 | Ordering Joey Ganez RPA/RA | Date Collected N/A<br>Date Received<br>Date Reported 08/31/2016 09:53 AM |

**HISTORY/CLINICAL DATA:**
Date of Last Menstrual Period
Previous Pap, 9/14: within normal limits

**SPECIMEN(S) SUBMITTED:**
A VAGINAL/CERVICAL LIQUID-BASED PREPARATION (Thinprep)

**FINAL DIAGNOSIS:**
A VAGINAL/CERVICAL LIQUID-BASED PREPARATION (Thinprep)
SATISFACTORY FOR EVALUATION ENDOCERVICAL COMPONENT PRESENT
HORMONAL EFFECT CONSISTENT WITH AGE AND HISTORY
**NEGATIVE FOR INTRAEPITHELIAL LESION OR MALIGNANCY

**COMMENTS:**
HPV testing: Will be performed on this specimen as ordered. Results, when available, will be issued under a separate report.
This Pap smear was screened by the ThinPrep Imaging System along with an additional manual rescreening by a cytotechnologist at 390 E. Longview st. Fayetteville, AR 72703 CLIA#04D0468675.

"Electronically Signed Out"
KIU:Anthony N. Hui, MD Medical Director Lab 1/4/2016 14:19

**SNOMED CODES:**
A M39200 (Reticulum. mucus), M43000 (Chromo. mes), P1141 (Biopsy. cervuterus), (Lower lip, nos)
CPT A 88305
Diagrillus rendered at E. Longview st. Fayetteville, AR 72703 CLIA# c 4D0468675

31-7-2014

10:10 AM

JOHN (9)
TUTI

**Expiring Rx**

**Physician**
Physic an Name A DAWAN GUNTER

NPI/D EAf 16795 98254 /RG59 16917

**Patient**
First Name Bob

Last Name ODEN KIKK

DOB 12/25/1959

Addre ss BobO DENK RK, MIDLO THIAN

29112

Rx Refills 1
Custom Message

Comments
hhhh

**Shamaa & Raid**

# Fax

| | | | |
|---|---|---|---|
| **To** | TEST TEST | **From** | A. Philips |
| **Fax** | 855-330-1239 | **Callback** | (918) 496-0884 |
| **Company** | | **Pages** | 1 |
| **Date** | 7/20/2017 | **Time** | 2:40:08 PM |
| **Subject** | test | | |

**Memo**

☐ Urgent ☐ For Review ☐ Please Reply ☐ Confidential

**Free fax please test with sending a fax to this number let me know if you recieve errors**

Adam Rush
Sent: Sunday, March 12, 2017 3:16 PM
To: Matt Terrell

To test the send functionality of your fax machine, send a one-page fax to 1-855-330-1239

Adam Rush
IT Analyst
One AMC Way
11500 Ash Street, Leawood, KS 66211
Email: arush@amctheatres.com

TRANSMISSION VERIFICATION REPORT

TIME 02/09/2010 05:34
SER.# BSK436A02

Classified

Job ID: FAX_EPSON9A598A__Artisan_830___IP_-47
Title: Taking Screenshots in Mac OS X - Mac Guides
Printed For: MacMan
Printed From: localhost
Billing Information: test info space

Classified

[redacted] VERIFICATION REPORT

[redacted] 10/30/2013 19:03
NAME
FA
TC
OFFICER [redacted] 03/14/2018

DATE TIME
PAR ID /NAME
DURATION
PAGES( )
RESULT
MODE

[redacted]
BUSY
[redacted]

BUSY BUSY/NO RESPONSE

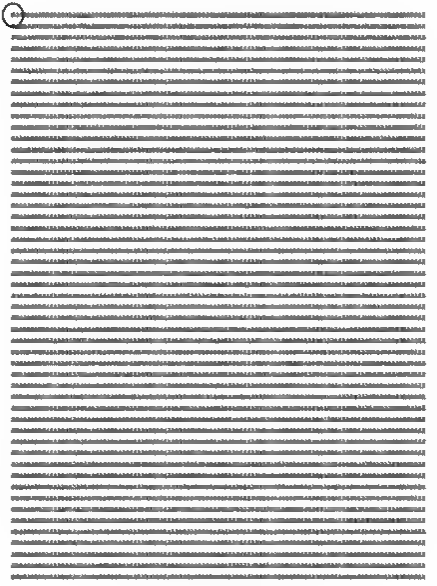
1 0 5 1 5 0 7 8 9

# Test Fax

~~To : 63011~~

To : (855) 330-1239

From : 66076

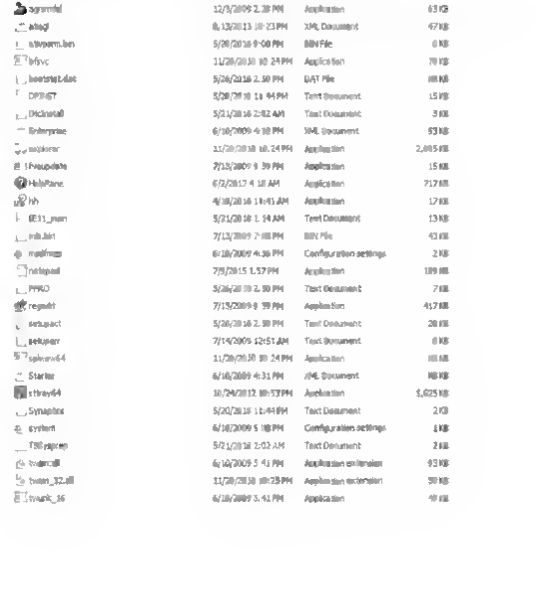


# Try to find the "g"

Email Thuncides@gmail.com for the location

TESTING
FAX

2:03 PM


Name
Date modified
Type
Size
Web
7/14/2009 1:32 AM
File folder
wnexus
5/21/2010 2:46 PM
File folder
agrelab64
12/3/2009 2:37 PM
Application
42 KB
agrsmmfal
12/3/2009 2:38 PM
Application
63 KB
alog4
6/13/2013 10:23 PM
XML Document
47 KB
allvparm.ben
5/20/2010 9:00 PM
BIN File
0 KB
bfjvc
11/20/2010 10:24 PM
Application
70 KB
beerstat.dat
5/26/2010 2:30 PM
DAT File
88 KB
DRIVE7
5/20/2010 1:44 PM
Text Document
15 KB
DKclear.all
5/21/2010 2:02 AM
Text Document
3 KB
Enterprise
6/16/2009 4:30 PM
XML Document
93 KB
explorer
11/20/2010 10:24 PM
Application
2,085 KB
FavoriteMe
7/13/2009 9:39 PM
Application
15 KB
HelpPane
6/2/2017 4:10 AM
Application
717 KB
hh
4/10/2010 10:41 AM
Application
17 KB
IE11_main
5/21/2010 1:54 AM
Text Document
13 KB
ntk.bin
7/13/2009 7:08 PM
BIN File
43 KB
msdfmap
6/16/2009 4:36 PM
Configuration settings
2 KB
notepad
7/9/2015 1:57 PM
Application
189 KB
PFRO
5/26/2010 2:30 PM
Text Document
7 KB
regedit
7/15/2009 9:39 PM
Application
417 KB
setupact
5/26/2010 2:30 PM
Text Document
28 KB
setuperr
7/14/2009 12:51 AM
Text Document
0 KB
splwow64
11/20/2010 10:24 PM
Application
108 KB
Starter
6/16/2009 4:31 PM
XML Document
NB KB
ttthreyd64
10/24/2012 10:53 PM
Application
1,025 KB
Symantec
5/20/2010 11:44 PM
Text Document
2 KB
system
6/16/2009 5:18 PM
Configuration settings
1 KB
TSEpaper
5/21/2010 2:02 AM
Text Document
2 KB
twain.dll
6/16/2009 5:41 PM
Application extension
93 KB
twain_32.dll
11/20/2010 10:23 PM
Application extension
98 KB
twunk_16
6/16/2009 5:41 PM
Application
40 KB

Invoice No 10100

# INVOICE

36 7733- 16 Mull D... CA 6

**Customer**

Name Ehrlich, Inc
Address Ann ca Ter
City San Clemente
Phone (949)xxx-xxxx Fax (949)987 1234

LA ZIP 92672

**Misc**

Date 5/31/2022
Location

Cerritos CA

| Hours | Description | | Rate/Hour | | TOTAL |
|---|---|---|---|---|---|
| 6.5 | Excavation | 0/01 | $ 75.00 | $ | 487.50 |
| 7.5 | Sand Bags | 2.02 | $ 75.00 | $ | 562.50 |
| 8 | Transportation/Labor | 5/01 | $ 75.00 | $ | 600.00 |

SubTotal $ 1,800.00

**Payment** Check

Comments
Name
OGM
Expense

TOTAL $ 1,800.00

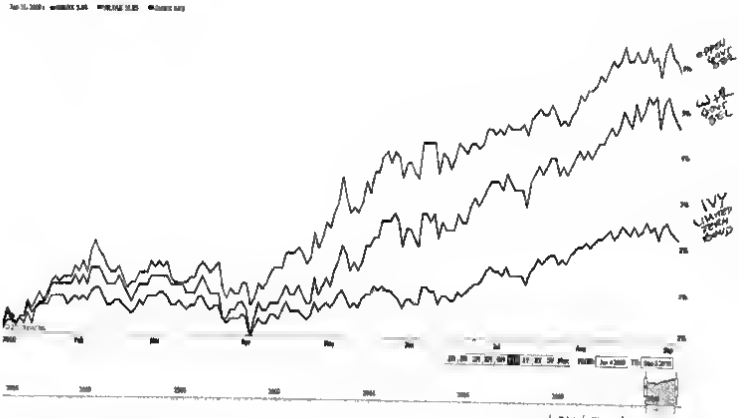
Office Use Only

*Terms: Payment Gross 15 Days.*
*Service charge of 1.2% per month (14.4% per annum)*
*will be charged on all past due accounts*

*Thank you for your business!*

TEST FAX

MAINE

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1855 330 1239

Test

Tool & Gage Corp.
12104 W. Carmen Avenue
Milwaukee, WI 53225
PH: 414-760-0909 • FX: 414-760-0158
EMAIL: info@toolandgage.com
www.toolandgage.com

# FAX COVER SHEET

| | |
|---|---|
| TO | Donal Duck |
| COMPANY | GGG |
| FAXNUMBER | 12132842943 |
| FROM | HaukeJungnitz |
| DATE | 2016-01 31 08 08 46 GMT |
| RE | Test |

COVER MESSAGE

Hello World

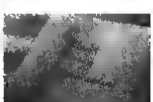
1-855-330-1239

Chart of [redacted]

9800 to EC

aurelia

Hello Fam just
testing fax machine



A FULL MOON SPELL FOR LOVE

When the Moon is full it is at the height of its power. This is an excellent time to perform love spells concerning fulfillment and abundance

YOU WILL NEED:

- 1 red apple (preferably organic)
- Pink and/or red rose petals
- Red pen
- Knife
- Large sheet of pink paper
- Red ribbon

Red and pink are the colours of love. Use them in your spell to guarantee the best results.

1 [illegible] down on pink paper the [illegible] you're looking for in your [illegible] match.

2 Hold your apple up to the Moon and [illegible] Goddess [illegible] to [illegible] with your [illegible].

3 [illegible] knife and use it to carve into the apple an image of two hearts touching.

4 Sprinkle [illegible] petals on the paper and use it to wrap them and the apple up with your writing on the inside.

5 [illegible] ribbon around the [illegible] as many times as you speak your [illegible] ideal.

6 Take the package to a natural place such as a park or the woods. Show it to the Moon [illegible] as you [illegible] away. You will soon find [illegible] love that you [illegible]

THE INGREDIENTS OF LOVE

[illegible]

[illegible]	[illegible]	[illegible]	[illegible]	[illegible]
Goals and level	Red	Lavender, rose	Violet, [illegible]	[illegible], glamorous
Passionate	[illegible]	[illegible]	[illegible]	[illegible]
[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

M&T Bank

December 26 2012

Raise the green flag for your Overdraft Protection Plan.

Eric M. Press
Jacob M. Press
3 Oriole Pl.
Rye Brook, NY 10573 1211

Dear Valued Customer:

As a valued M&T checking customer, you may be interested in adding overdraft protection to your checking account.

Bouncing a check or overdrawing your account can be an unpleasant and costly experience that can happen to anyone. At M&T we can help you avoid this uncomfortable situation with three great overdraft protection options:

**Credit Card Link**
You can link your M&T Visa Credit Card to your personal M&T checking account for automatic overdraft protection. Available funds from your credit card are automatically transferred to your checking account when you exceed your available balance.[1,3]

**Savings Link**
You can also link an M&T savings account to your personal M&T checking account for overdraft protection. If you don't have available funds in your checking account to cover an item, we'll automatically transfer available funds from your M&T savings account to your checking account to cover the overdraft amount.[2,3]

**M&T Overdraft Line of Credit**
There is no cost to open an Overdraft Line of Credit and no annual fee to maintain it. If you don't have available funds in your checking account to cover an item, we'll automatically transfer available funds from your M&T Overdraft Line of Credit account to your checking account to cover the overdraft amount. Other terms apply.[3,4]

Stop by an M&T branch, call 1 800-724-3222 or visit mtb.com/overdraft to learn about your options.

Once again, thank you for choosing M&T. We look forward to serving your financial needs today and in the years to come.

Sincerely,

Sam Guerrieri
Manager Retail Branch Network

Questions?
We're here to help
Stop by an M&T branch
Call 1-800-724-3222
Visit mtb.com/overdraft

mtb.com 1 You must have an Select credit card with your M&T Visa Credit Card Account in order to access the overdraft protection. 2 You must have one of any credit accounts. Savings account options: Savings, Statement Savings, Money Market, Club Account or Money Market Deposit Account. 3 Subject to terms and conditions of credit card or credit line agreement. Credit card and credit line subject to credit approval. 4 Overdraft Line of Credit subject to credit approval. Minimum monthly payment applies. Variable APR. Overdraft Line of Credit Advances: 15% for all of 2012. Rate will increase to 18% on January 1, 2013. Rates and terms subject to change after consummation. All other terms and conditions of agreement will remain in effect as they were on your loan or credit line. After an account is opened, promotion begins, and rates are subject to change at any time in accordance with applicable laws and agreements. © 2012 M&T Bank. Member FDIC. Overdraft Dec 2012 (1) (1)

TEST
NUMBNUTS

you hp

Thank you for choosing hp

## Other useful hp web sites

**www.hp.com/register**
Use this web address to register your

**www.hp.com/support**
Use this web address to obtain additional support for

**www.shopping.hp.com/**
Use this web address to order supplies and accessories for your hp product.

## Help us help you

We're interested in your feedback on this fax verification process. Send your comments to

**fax.feedback@hp.com**

invent

MS

© 2004 Hewlett-Packard Development Company, LP

www.hp.com

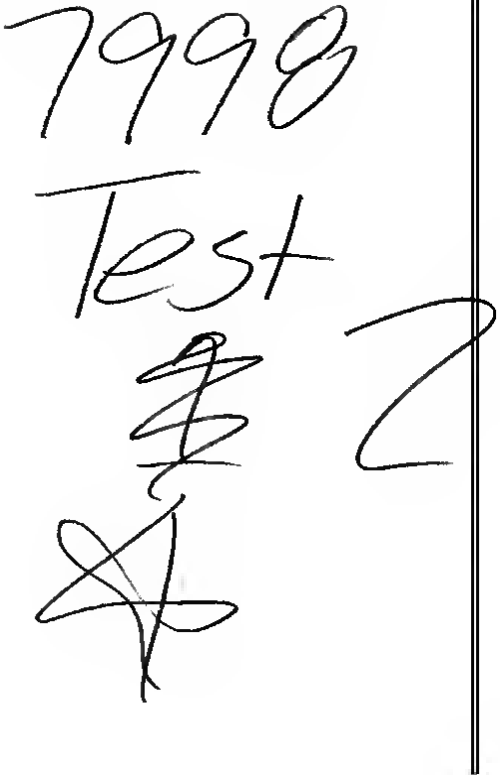
1-855-330-1239

test

12/1/14

Test

Shine


7998
Test

TEST

1-855-330-1239

1-213-294-2943

Test

**Recipient Information**

**To: Tim Powell**
**Company: Powell Labs Inc**
**Fax #: 12313352678**

faxZERO.com
*send a fax for free*

**Sender Information**

**From: Tim Powell**
**Email address: tpowell@powelllabs.com (from 107.4.97.247)**
**Phone #: 2312456510**
**Sent on: Friday, February 18 2018 at 11:28 PM EST**

This fax was sent using the FaxZero.com free fax service. FaxZero.com has a zero tolerance policy for abuse and junk faxes. If this fax is abusive or blocked please e-mail support@faxzero.com or send a fax to 858-230-1235 or phone 707-406-0999. Specify fax #2140804. We will add your fax number to the block list.

GREETINGS
FROM
"BARBADOS"

# Xerox WorkCentre 7855
# SMTP Transfer Report

**Job Status:** **FAILED** Job canceled by user

## Job Information

| | |
|---|---|
| Job name: | [illegible] |
| Submission Date: | 03/18/15 |
| Submission Time: | 03:02 PM |
| Images Scanned: | 1 |
| Pages: | 1 |
| Document Name: | |
| Format: | Image Only(R) |
| Encrypted E-mail: | No |

## SMTP Server

| | |
|---|---|
| Address: | 136.43.202.125 |

## Message Settings:

| | |
|---|---|
| Subject: | Scan from WorkCentre 7855 at [illegible] |
| From: | printer01@xerox.com |
| Reply To: | printer01@xerox.com |
| To: | |

1. printer01@xerox.com

```
#### Epson Status Sheet ####

<General Information>
MAC Address                     AC:18:26:2E:DA:1D
Wi-Fi Direct MAC Address 1      AE:18:26:2E:DA:1D
Wi-Fi Direct MAC Address 2      AE:18:26:2E:5A:1D
Software                        F5.CN11F3    26(N003 P006.D004/004DD072)
Printer Model                   WF-4630 Series
Printer Name                    EPSON2EDA1D

<Ethernet>
Network Status                  Auto(Disconnected)
Port Type                       Auto

<Wireless>
Wireless Mode                   Off
Communication Mode              None
Operation Mode                  None
Communication Speed             None
SSID                            None
Channel                         None
Security Level                  None
AP Authentication Method        None
Link Status                     Disconnected
Link Down Count(recent)         None
Link Down Count(total)          None
Access Point (MAC Address)      None
Signal Strength                 None
Path List                       None
Configuration Method            None

<TCP/IP IPv4>
IPv4                            Enable
Obtain IP Address               Unknown
IP Address                      None
Subnet Mask                     None
Default Gateway                 None
APIPA                           None
Acquisition way of DNS Addr     Auto
Primary DNS Address             None
Secondary DNS Address           None

<TCP/IP IPv6>
IPv6                            Enable
Default Gateway                 None
Primary DNS Address             None
Secondary DNS Address           None
Privacy Extensions              Disable

<Proxy>
Proxy Use                       Disable
Proxy Address                   None
Proxy Port                      None

<Dynamic DNS>
Dynamic DNS                     Disable
Host Name                       EPSON2EDA1D
Obtain Host Name                Manual

<Supplies>

[illegible] 1/2 [illegible]
```

# 6th TEST FAX

PO Box 44, Somecity Somestate 1234567

*URGENT!!*

March 18 2011

| ***To*** | ***From*** |
| --- | --- |
| ATTN | Alf |
| Fax: 888-877 1655 | Fax: |
| Tel: | Tel: |
| E Mail: | E-Mail: |

This fax consists of 1 page Please inform us if transmission errors occur

RE: OK more testing,
thanks

JERRY

# FAX

| | |
|---|---|
| Date: | 11/12/2016 |
| Pages including cover sheet: | 1 |

| | |
|---|---|
| To: | 14013124958@rcfax.com |
| | |
| | |
| | |
| | |
| | |
| Phone | |
| Fax Number | +14013124958 |

| | |
|---|---|
| From: | Leo Cote |
| | |
| | |
| | |
| | |
| | |
| Phone | (401) 354-7904 *5 |
| Fax Number | (401) 354-7904 |

NOTE:

"as"

# TRAVERTINE GROUP

## JULY TRAVERTINE PROMOTIONS

### PAVERS & COPINGS

| | | |
|---|---|---|
| 12x12 Antique Gold Paver | Tumbled | $2.49/Sf |
| 6x12 Rustic Gold Paver | Tumbled | $2.49/Sf |
| 6x12 Scabos | Tumbled | $2.79/Sf |
| 16x16 Rustic Gold | Tumbled | $2.95/sf |
| Rustic Gold French Pattern | Tumbled | $3.49/Sf |
| 16x24 Gold Paver | Tumbled | $3.29/sf |
| 4x8 Gold Coping | Honed/Unfilled | $1.99/pc |
| 4x8 Walnut Coping | Honed/Unfilled | $1.99/pc |
| 6x12 Gold Coping | Tumbled | $3.00/pc |
| 4x9 Noche Remodel Coping | Tumbled | $4.89/pc |

### TRAVERTINE & MARBLE TILES

| | | |
|---|---|---|
| 18X15 Ivory Rustic | Honed/Filled | $2.35/Sf |
| 12X12 Noche | Honed/Filled | $1.75/Sf |
| 18x18 Dark Walnut | Honed/Filled | $1.99/Sf |
| 12x24 Ivory Vein Cut | Honed/Filled/Pol | $2.55/Sf |
| 18x18 Golden Ink Patina | Brushed/Chiseled | $2.25/Sf |

### FRENCH PATTERN

| | | |
|---|---|---|
| Ariete French Pattern | Brush/Chiseled | $3.29/sf |
| Red French Pattern | Brush/Chiseled | $1.79/Sf |
| Silver French Pattern | Brush/Chiseled | $2.85/Sf |
| Giallo Gold French Pattern | Brush/Chiseled | $2.65/sf |

### ACCESSORIES

| | | |
|---|---|---|
| 4X4 Tumbled Noce | Tumbled | $.22/pc |
| Classic Pencil 5/8"x8" | Honed | $1.50/pc |
| 4X4 Tumbled Medium | Tumbled | $.25/pc |
| 3X6 Tumbled Diamond (light,noche,( | Tumbled | $.35/pc |
| Crema Marble Pencil Molding | Honed | $1.25/pc |
| Burdur Brown Marble Chair Rail | Honed | $1.75/pc |

5113 W Knox, Tampa FL 33634
PH: 813-873-7711 FAX: 813-873-7712
WWW.TRAVERTINEGROUP.COM

KEEP
CALM
JESUS
LOVES
YOU

I FOUND THE BAT CAVE

| Fund Name | Symbol | Fund Category | Aggressive | Moderate | Conservative |
|---|---|---|---|---|---|
| Vanguard Total World Stock ETF | (VT) | Global | 100.0% | N/A | N/A |

Buy VNQI - 64 29
1625
3,905 f

Sell WPS - 9/6430

SCHA - 18000 ✓
SCHE - 14500 ✓

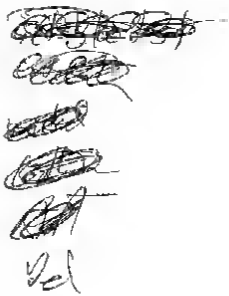
13901

171 259
6 462
177 659

Test Page

#10-12-16

1855-32-1239



TEST

Fax Confirmation Report

Date & Time : AUG-30-2015 06:43AM SUN
Fax Number : 1111
Fax Name :
Model Name : WorkCentre 4260

Total Pages Scanned: 1

No.	Remote Station	StartTime	Duration	Page	Mode	Job Type	Result
001	918553301239	08-30 06:41AM	00'00	000/001	EC	HS	Fail

Abbreviations:
HS:Host Send PL:Polled Local EC:Error Correct TS:Terminated by System
HR:Host Receive PR:Polled Remote MP:Mailbox Print RP:Report
WS:Waiting Send MS:Mailbox Save TU:Terminated by User G3:Group3

TEST
FAX

FaxBack System Test

Thank you for creating hp

## Other useful hp web sites

**www.hp.com/register**
Use this web address to register your HP product.

**www.hp.com/support**
Use this web address to obtain additional support for your product.

**www.hpshopping.com**
Use this web address to order supplies and accessories for your HP product.

## Help us help you

We're interested in your feedback on this fax verification process. Send your comments to:

**faxfeedback@hp.com**

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www.hp.com

Is it inapropriate
To tell homeless people knock knock jokes?
MEMEBASE

# FAX
TRANSMISSION

To:

From: Middle Tennessee State University

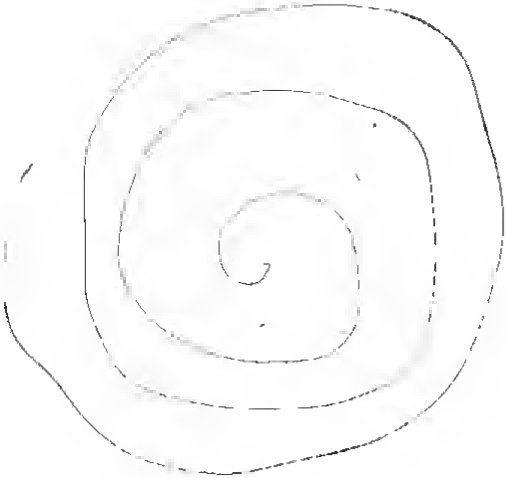
Subject: Test Fax

Message:

Test Fax

**Company Name**
Address
Tel Fax
Email Website

This fax was sent by GFI FaxMaker for Exchange



SBA

FOR INFORMATION CALL

EWR

07/27/2013

QA717-S

SERVICE STATION TRACKING NUMBER

**QA717-S**

ORIGIN DEST

EWR JFK

Corporate Headquarters, 233 Crossways Park Dr

Woodbury NY 11797 800-343-5548

SHIPPER 123

ShipperTest

10 Main Rd,

Edison, NJ, 08817

9170119383

RECEIVER 999

120 Second St,

Brooklyn NY 112 8,

7150930191

BILL TO:

BILLING TO [redacted] SHIPPER

ShipperTest

DELIVERY INSTRUCTIONS, MSD by 07/31/2013

Test Special Instructions

PIECES DESCRIPTION WEIGHT DIMENSIONS
LENGTH WIDTH HEIGHT

Must Deliver No Later Than 07/31/2013

RECEIVED FREIGHT IN GOOD ORDER

RECEIVER'S SIGNATURE _____

PRINT RECEIVER'S NAME _____

TELEPHONE NUMBER _____

**QA717-S**

TRACKING NUMBER

DATE [redacted]

TIME [redacted]

**TOTAL CHARGES**

TRANSMISSION VERIFICATION REPORT

TIME 06/14/2016 12:36
NAME
FAX
TEL
SER.# KIJ9B05361

| | |
|---|---|
| DATE,TIME | 06/14 12:36 |
| FAX NO./NAME | 1[redacted]8162 |
| DURATION | 00:00:[redacted] |
| PAGE(S) | 01 |
| RESULT | BUSY |
| MODE | STANDARD |

BUSY BUSY/NO RESPONSE

X5

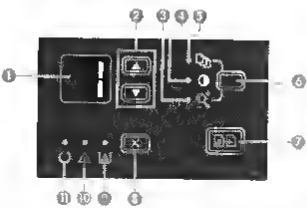
Test Fax

1.19.16

Test fax

# Control-panel layout

## M1130 Series




| | | |
|---|---|---|
| 1 | | **LED display screen** Displays the number of copies, the level of darkness for copies, and the percentage of copy size reduction or enlargement. It also shows error codes that alert you of problems that require attention |
| 2 | ▲<br>▼ | **Up and down arrows** Increases or decreases the number of copies, the level of darkness for copies, or the percentage of copy-size reduction or enlargement.<br>• Press the buttons for less than one second to increase or decrease copy settings by one increment.<br>• Press the buttons for one second or longer to increase or decrease the level of darkness to the maximum or minimum value<br>• Press the buttons for one second or longer to increase or decrease the number of copies or the percentage of copy-size reduction or enlargement by 10 increments |
| 3 | | **Reduce/Enlarge copy light** Indicates the copy-size reduction or enlargement feature is active. |
| 4 | | **Darker/Lighter copy light** Indicates the copy-darkness feature is active. |
| 5 | | **Number Of Copies light** Indicates the number-of-copies feature is active |
| 6 | | **Setup button** Scrolls between the copy settings for number of copies, do binds, and copy size for each job. The default option is the number of copies. To change the default settings for all jobs, scroll to the setting and then press and hold the button for 3 seconds. When the light is blinking, adjust the setting. Press this button again to save the setting |
| 7 | | **Start Copy button.** Starts a copy job. |
| 8 | | **Cancel button** Cancels the current job, or clears the last setting you made. When the product is in the Ready state, press this button to reset the copy settings to the default values |
| 9 | | **Toner-level status light** Indicates the level of toner in the print cartridge is low |
| 10 | | **Attention light** Indicates a problem with the product |
| 11 | | **Ready light** Indicates the product is ready or is processing a job |

# Vonage Test Fax

| To | From: |
|---|---|
| Fax: | Fax: |
| Phone | Phone |
| Subject: Test Fax | Date |

## Fax Settings

Reference your Owner's Manual for help adjusting the settings below

| | |
|---|---|
| ECM (error correction mode) | Off |
| Baud Rate | 9600 |
| International | On (this is set on a per-call basis) |
| Resolution | Standard |
| Answer Mode | Fax Only |
| Rings to Answer | Zero (0) |
| Call Waiting | Off |
| Bandwidth Saver | High (90 kbps) |
| Distinctive Ring | Off |

## Troubleshooting Steps

The steps below will help you resolve common faxing problems.

- Switch off fax machine and unplug power adapter from device and from wall outlet
  - Let fax machine remain off for 60 seconds.
- Try a different phone cord between the fax machine and the Vonage device.
- Eliminate any splitters between the fax machine and the Vonage device.
- Connect Fax machine directly to the Vonage device bypassing any home wiring
- If using an All-In-One device, temporarily disconnect device from PC.

## Further Assistance

If you need further assistance using your Vonage Fax Service we are always available to help

Call us at 1-VONAGE-HELP (1-866-243-4357) or visit **www.vonage.com**

Test

Test

Test

855 330 1234

## Register Now for VBS July 13-17th

## Register NOW Family Camp at Lazy F Aug 5-9th

**Lazy F**

Camp and Retreat Center

Please Join Us for a Celebration of Life of Linda Toycen Saturday June 27th at 2:00 PM at Lake Sawyer Christian Church
31605 Lake Sawyer Rd SE
Black Diamond, WA 98010

## Ministries & Events this Week
### June 14, 2015—June 21, 2015

| | |
|---|---|
| SUNDAY 14 | |
| 9:00 & 10:45AM | Worship–Sanctuary |
| 2:45 PM | Guardian Choir |
| 6:30-8 PM | Middle School Youth Grp-His Place |
| MONDAY 15 | |
| 6:00 PM | Scouts–His Place |
| TUESDAY 16 | |
| 7:00 PM | AA- His Place |
| WEDNESDAY 17 | |
| 7:00PM PM | Senior High Youth Grp.—His Place |
| THURSDAY 18 | |
| 9:10:30 AM | Cornerstone Play Group—Nursery |
| 6:30 PM | Trustees |
| 7:00 PM | Praise Team Rehearsal |
| 7:00 PM | Finance |
| SATURDAY 20 | |
| 9:00 AM | Women's Devotional & Fellowship |
| NEXT SUNDAY 21—Father's Day | |
| 9:00 & 10:45AM | Worship–Sanctuary |
| 6:30-8 PM | NO YOUTH GROUP TONIGHT |

Cornerstone Church
20730 SE 272nd ST
Covington, WA 98042
www.BuildingonJesus.org

Pastor James Murphy
pastor@buildingonjesus.org
Office/Kimberley Luckey:
office@buildingonjesus.org
Children's Ministries Director
Charlaine Gerardi
children@buildingonjesus.org
Youth Ministries Director Ashley Skinner:
ashley.skinner91@gmail.com

## Cornerstone Church

believe connect serve share
cornerstone church

**Sunday Morning Worship**
**9:00 AM & 10:45 AM**
**June 14th**

# Summer Of Love

*"God is Love"*

TEST

FAX

#168

CROSSROADS of the WEST
GUN★SHOWS
COW PALACE
APRIL 12-13
NEXT SHOW JUNE 28 29
DALY CITY, CA.
2600 GENEVA AVE.
FIND US ON TWITTER
BUY TICKETS ONLINE &
SIGN UP FOR FUTURE DISCOUNTS
$3.00 OFF ANY CROSSROADS GUN SHOW WITH THIS POSTCARD!

# Fax Toy

Random Stuff Sent From Your Fax Machine
Fax something interesting toll free to 1-855-330-1239 or 1-213-294-2943

Wednesday October 07 2015

| Reservation Confirmation |
| --- |
| RC464720-3081-293 |
| Created 10/07/2015 21:20:14 GMT |
| Booking Source Standalone |

For To Bhatu Beer-Hill Hotel & Suite - 1
Fax 1(213)-294-2943
Attn Ajesh Patel
Subject Booking Confirmation

Dear Ajesh Patel,

We have pleased to confirm your reservation at the Corporate Rate Contracted for Standard Room. Breakfast and Internet are complimentary. Please review the following information carefully and contact us if you have any questions.

Thank you for choosing Insight.com

| Guest Info | | | |
| --- | --- | --- | --- |
| Booked for | Tesla Tesla | Title | Mr/Miss |
| Address | Test | Postal | 3453 |
| City | Adamsville | Country | USA |
| Email address | nikola.tesla@insight.com | Primary Tel | 646-3464564 |

| Billing Information | | | |
| --- | --- | --- | --- |
| Card Type | Visa | Exp Date | 10/2015 |
| Card Number | 4111111111111111 | CVV Code | 232 |
| | | Grand Total | $ 525.75 |

| Room Details | | | |
| --- | --- | --- | --- |
| Number of Rooms | 1 | Number of Nights | 1 |
| Check In | October 7, 2015 | Check Out | October 8 2015 |

| Guest Name | | | |
| --- | --- | --- | --- |
| First Name | Tesla | Last Name | Tesla |
| Room Rate | Bed | Bed 7 | |
| | Rate | $ 000.00 | |

Sub-Total: $ 450.00
Tax (17.500) $ 78.75 + Fees ($4.00) = Total: $ 525.75

Extra Bed: N/A @ 7.50 Per Night Per Room
Discount: $$$$ On on TEST

Special Request Host

Thank you for choosing Insight.com for your travel needs.

www.FunkTrompette.com

OK

BACKOFFICE

TEST

FAX

1-855-330-1239

1-213-294-2943

Thursday October 25 2018

| Reservation Confirmation |
| --- |
| 7C3318954745-285 |
| Check-in 10/27/2018 Check-out 10/28/2018 |
| Booking Source PMS |

For Mr. **Bella BHALLA BHAN ITH HOTEL SUITS**
From 1(555)-930-3239
Attn: **Ajesh Chandran**
Subject Booking Confirmation

Dear Ajesh Chandran

We have received the following booking for your property at the Hotel Bella Bhalla Bhan Ith Hotel Suits. Please review the booking details carefully and contact us immediately if there is any discrepancy.

Thank you
Hotel Suits

**Guest Information**

| | | | |
| --- | --- | --- | --- |
| Booked by: | Mr. Ajesh Chandran | Title: | Manager |
| Address: | Manager | Zip: | Manager |
| City: | Montreal | Country: | MONTREAL A |
| Email Address: | kreshmi.kent.pmanish@mail.com | Telephone Number: | 7133274143234 |

**Booking Information**

| | | | |
| --- | --- | --- | --- |
| Payment Method: | Cash | Grand Total: | 95.76 |

**Room Details**

| | | | |
| --- | --- | --- | --- |
| Number of Guests: | 1 | Number of Nights: | 1 |
| Check-In: | October 27, 2018 | Check-Out: | October 28, 2018 |

**Room 1 - Premium Standard Single Room**

| | | | |
| --- | --- | --- | --- |
| First Name: | Mr. A an | Last Name: | Chandran |
| Rate Detail | Date | Oct 27 | |
| | Rate | 37.00 | |

Sub Total: 85.00
Tax (10.00%): 9.76 Fees: 85.00 Total: 95.76

Note: Hotel Suits does not charge Resort Fee for this room.

**Cancellation Policy**

We have a 72 hour Cancellation Policy. If you need to cancel or change your booking, please contact us at least 72 hours before your check-in date. If you cancel after the expiration of this Cancellation Period or you fail to check-in, a one time charge will be levied on your credit card. We will not charge you for cancellations made before the 72 hour limit.

Hotel Suits is not responsible for any lost or stolen items. Please contact us if you have found any lost items.

**TEST**

**TEST**

**TEST**

TEST FAX

TEST FAX

This test was sent to:

Sent from:

**Prayer to St. Joseph over 1900 years old**

**O St. Joseph whose protection is so great, so strong, so prompt before the Throne of God, I place in you all my interests and desires O St Joseph do assist me by your powerful intercession and obtain for me from your Divine Son all spiritual blessings through Jesus Christ Our Lord, so that having engaged here below your Heavenly power I may offer my Thanksgiving and Homage to the most Loving of Fathers O St. Joseph I never weary contemplating you and Jesus asleep in your arms I dare not approach while He reposes near your heart Press him in my name and kiss His fine Head for me, and ask Him to return the Kiss when I draw my dying breath. St. Joseph, Patron of departing souls, pray for us Amen**

***Say for nine consecutive mornings for anything you may desire It has seldom been known***

***to foil.***

**This prayer was found in the fiftieth year of Our Lord Jesus Christ In 1500's it was sent by the Pope to Emperor Charles when he was going into battle**

**Whoever reads this prayer or hears it or carries it, will never die a sudden death, nor be drowned, nor will poison take effect on them They will not fall into the hands of the enemy nor be burned in any fire, nor will they be defeated in battle**

**Make this prayer known everywhere**

Imprimatur
Most Rev George W Ahr
Bishop of Trenton

Back to Et Cum Spiritu Tuo

From this, and later agreements, the area becomes known as the Trucial Coast. Raids continued intermittently until 1835, when the sheikhs agreed not to engage in hostilities at sea. In 1853, they signed a treaty with the British, under which the sheikhs (the "Trucial Sheikhdoms") agreed to a "perpetual maritime truce." It was enforced by the United Kingdom, and disputes among sheikhs were referred to the British for settlement.[22]

Flag of the Trucial Coast

Primarily in reaction to the ambitions of other European countries, the United Kingdom and the Trucial Sheikhdoms established closer bonds in an 1892 treaty, similar to treaties entered into by Britain with other principalities in the Persian Gulf. The sheikhs agreed not to dispose of any territory except to Britain and not to enter into relationships with any foreign government other than the United Kingdom without its consent. In return, the British promised to protect the Trucial Coast from all aggression by sea and to help in case of land attack.[23] British suppression of piracy meant that pearling fleets could operate in relative security. However the British prohibition of the slave trade meant an important source of income was lost to some sheikhs and merchants.[24]

## Pearling industry

During the 19th and early 20th centuries, the pearling industry thrived in the relatively calm sea, providing both income and employment to the people of the Persian Gulf. It began to become a good economic resource for the local people. Then the First World War had a severe impact on the pearl fishery, but it was the economic depression of the late 1920s and early 1930s, coupled with the Japanese invention of the cultured pearl, that all but destroyed it. The industry eventually faded away shortly after the Second World War, when the newly independent Government of India imposed heavy taxation on pearls imported from the Arab states of the Persian Gulf.[25]

The decline of pearling resulted in a very difficult era, with little opportunity to build any infrastructure.

Dubai in the mid-20th century

## Beginning of the oil era

Oil was first discovered in the 1950s. At the beginning of the 1960s, the first oil company teams carried out preliminary surveys and the first cargo of crude was exported from Abu Dhabi in 1962. As oil revenues increased, the ruler of Abu Dhabi, Zayed bin Sultan Al Nahyan, undertook a massive construction program, building schools, housing, hospitals and roads. When Dubai's oil exports commenced in 1969, Rashid bin Saeed Al Maktoum, the *de facto* ruler of Dubai, was also able to use oil revenues to improve the quality of life of his people.[26]

In 1955, the United Kingdom sided with Abu Dhabi in the latter's dispute with Oman over the Buraimi Oasis, another territory to the south.[27] A 1974 agreement between Abu Dhabi and Saudi Arabia would have settled the Abu Dhabi/Saudi border dispute, however the agreement has yet to be ratified by the UAE government and is not recognized by the Saudi government. The border with Oman also remains officially unsettled, but the two governments agreed to delineate the border in May 1999.[28]

## Union

The British had set up a development office that helped in some small developments in the emirates. The seven

## Participant DTMF Menu

Control functions are also available to participants (who are not moderators) and are accessible via a DTMF menu. You can invoke the DTMF menu at any time during the conference by pressing "*". Only you hear the menu, while other participants continue talking in the conference.

The following functions are available to participants through the DTMF menu:

* – Repeat the menu options
0 – Transfer to Operator
1 – Mute myself or unmute myself
2 – Participant count, followed by roll call
8 – Log in as moderator
# – To return to the conference

## NOTES

If you do not want to listen to the menu, you can invoke an option by pressing "*" followed by the digit for the option you want. For example, you can press "*8" to be transferred to the operator. If you enter any other digit, you are returned back to the conference.

### Log in as Moderator

When a participant invokes this option, they are asked for the moderator PIN. If the PIN is correct, they become a moderator and can execute moderator commands.

### Mute/Unmute

A participant can only mute or unmute themselves. If a moderator has muted a participant's line, the participant cannot unmute it.

### Transfer to Operator

This function disconnects you from the conference and transfers you to a phone number defined against the conference bridge. A human operator, an Auto Attendant, or a VoiceXML script can answer the call to help you.

BLAH !

BLAH !!

BLAH !!!

happy valentines day! and
you make me so hoppy..!
I'd say yes to
every favour you
ask me. even when.
GREATEST lovers
in the world!
:D I love you guys!
your not
looking
your special to me...
more special then
me :) you mom
and dad happy
valentines day!

7887

FAX

TEST

#7

# Windows XP Printer Test Page

Congratulations!

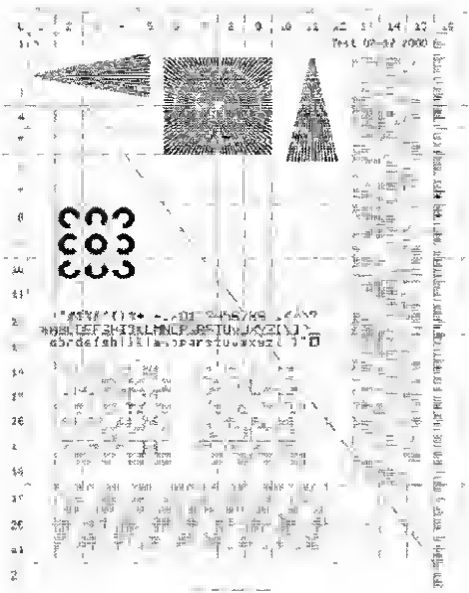
If you can read this information, you have correctly installed your Brother MFC-9330CDW Printer on GG-DUDGUE

The information below describes your printer driver and port settings

Submitted Time: 11:31:54 AM 7/1/2015
Computer Name: GG-DUDGUE
Printer Name: Brother MFC-9330CDW Printer (Copy 1)
Printer Model: Brother MFC-9330CDW Printer
Color Support: Yes
Port Name(s): USB002
Data Format: RAW
Share Name:
Location:
Comment: MFC-9330CDW
Driver Name: BRPRC12A.DLL
Data File: BRSMF9330CDW.USI
Config File: BRUIC12A.DLL
Help File: BRPRC12A_000U.CHM
Driver Version: 1.03
Environment: Windows NT x86

Additional Files Used by this Driver:

C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\BRENB330CDW.CAT
C:\WINDOWS\system32\spool\DRIVERS\W32X86\3\BRLGC12A.0400.DLL (1,3,0,0)
C:\WINDOWS\system32\spool\DRIVERS\W32X86\3\BRLGC12A.0000.DLL (1,3,0,0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\BRLGC12A.000C.DLL (1,3,0,0)
C:\WINDOWS\system32\spool\DRIVERS\W32X86\3\BRLGC12A.000C.DLL (1,3,0,0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\BRLGC12A.0007.DLL (1,3,0,0)
C:\WINDOWS\system32\spool\DRIVERS\W32X86\3\BRLGC12A.0010.DLL (1,3,0,0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\BRLGC12A.000A.DLL (1,3,0,0)
C:\WINDOWS\system32\spool\DRIVERS\W32X86\3\BRLGC12A.0006.DLL (1,3,0,0)
C:\WINDOWS\system32\spool\DRIVERS\W32X86\3\BRLGC12A.0416.DLL (1,3,0,0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\BRLGC12A.0013.DLL (1,3,0,0)
C:\WINDOWS\system32\spool\DRIVERS\W32X86\3\BRLGC12A.0014.DLL (1,3,0,0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\BRLGC12A.001D.DLL (1,3,0,0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\BRLGC12A.0008.DLL (1,3,0,0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\BRLGC12A.0008.DLL (1,3,0,0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\BRLGC12A.0019.DLL (1,3,0,0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\BRLGC12A.0002.DLL (1,3,0,0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\BRLGC12A.0022.DLL (1,3,0,0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\BRLGC12A.0005.DLL (1,3,0,0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\BRLGC12A.0006.DLL (1,3,0,0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\BRLGC12A.0015.DLL (1,3,0,0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\BRLGC12A.0018.DLL (1,3,0,0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\BRLGC12A.001B.DLL (1,3,0,0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\BRLGC12A.001F.DLL (1,3,0,0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\BRLGC12A.0001.DLL (1,3,0,0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\BRLGC12A.0021.DLL (1,3,0,0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\BRLGC12A.001E.DLL (1,3,0,0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\BRLGC12A.0404.DLL (1,3,0,0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\BRLGC12A.0004.DLL (1,3,0,0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\BRLGC12A.0012.DLL (1,3,0,0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\BRLGC12A.0011.DLL (1,3,0,0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\BRLGC12A.000E.DLL (1,3,0,0)



Test!!!

ms.

# Fax

## FACSIMILE

**Date** 12/18/2013

**To** 8888771655
**From** kevin mornll

**Subject** test

test

# EMERGENCY PLAN

**10 STEPS IN CASE OF A TERRORIST ATTACK IN EUROPEAN CITY**

1 TEARFUL CARTOONS

2 FACEBOOK FILTER

3 CRYING ON TV

4 LIGHT UP BUILDINGS

5 CANDLELIGHT VIGILS

6 MORE REFUGEES

7. CALL THOSE WHO WANT TO STOP IT BIGOTS

8. WAIT FOR THE NEXT ATTACK

9. REPEAT

# Getting the best results from your Mirage Ink Jet Media

**Information**

To get the best results from your Mirage media, modify the settings in your printer driver software. If you are using a different printer from the one listed below, please use comparable settings.

**For the following media please follow the diagram's below :**

Premium Photo Glossy Paper - Premium Photo Glossy Film - Silver Reflective Film - Artist Canvas - Photo Glossy Greeting Cards, and Window Decal

**The following Media does not require the Ink Saturation Reduction :**

Artist WaterColor Paper and Poly-Silk Adhesive.
Premium Matte Paper
Transparency Film

**Handling the media :**

Handle the media by the edges only. Avoid fingerprints on the image area of the printable surface before and after printing. To minimize drying time and to optimize image quality, avoid exposing the prints to excess moisture, high temperature and humidity.

**Removing prints :**

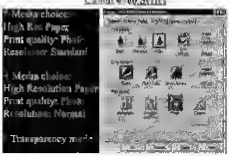
We recommend that you remove each print from the output tray and allow prints to dry completely before stacking. Complete drying time will vary depending on the environmental conditions. High humidity retards drying.

**Important! We do not recommend using any of our media in photocopiers, laser printers or any other equipment that uses dry toners.**

## Canon Printer Settings

Canon 600 series

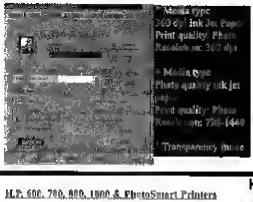
Canon 4000 Series



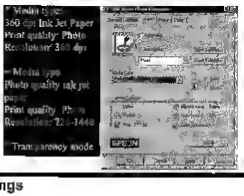

*Note: For Canon 200 series use only standard color print settings for Mirage media*

## Epson Printer Settings

Epson Photo EX & Photo 700

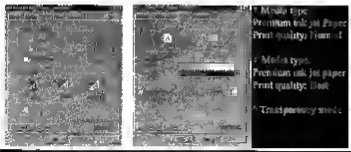



Epson 400,600,700,800,1520, 3000, 5000 series & Stylus Photo




## H.P. Printer Settings

H.P. 600, 700, 800, 1800 & PhotoSmart Printers




*Note: Due to the rapid changes in software these settings may be for your particular printing. Please refer to your printer manual for other settings.*

855
330-1239

TOSHIBA e-STUDIO4555C

DF TOTAL 1167

PRINT COUNTER

TOTAL

| | FULL COLOR | TWIN/MONO COLOR | BLACK | TOTAL |
|---|---|---|---|---|
| COPY | 216 | 0 | 12411 | 12626 |
| FAX | 0 | 0 | 2911 | 2911 |
| PRINTER | 2053 | 0 | 63546 | 65599 |
| LIST | 0 | 0 | 299 | 299 |
| TOTAL | 2269 | 0 | 79167 | 81435 |

COPY

| | FULL COLOR | TWIN/MONO COLOR | BLACK | TOTAL |
|---|---|---|---|---|
| SMALL | 215 | 0 | 12251 | 12466 |
| LARGE | 0 | 0 | 160 | 160 |
| TOTAL | 215 | 0 | 12411 | 12626 |

FAX

| | FULL COLOR | TWIN/MONO COLOR | BLACK | TOTAL |
|---|---|---|---|---|
| SMALL | 0 | 0 | 2911 | 2911 |
| LARGE | 0 | 0 | 0 | 0 |
| TOTAL | 0 | 0 | 2911 | 2911 |

PRINTER

| | FULL COLOR | TWIN/MONO COLOR | BLACK | TOTAL |
|---|---|---|---|---|
| SMALL | 2053 | 0 | 63546 | 65599 |
| LARGE | 0 | 0 | 0 | 0 |
| TOTAL | 2053 | 0 | 63546 | 65599 |

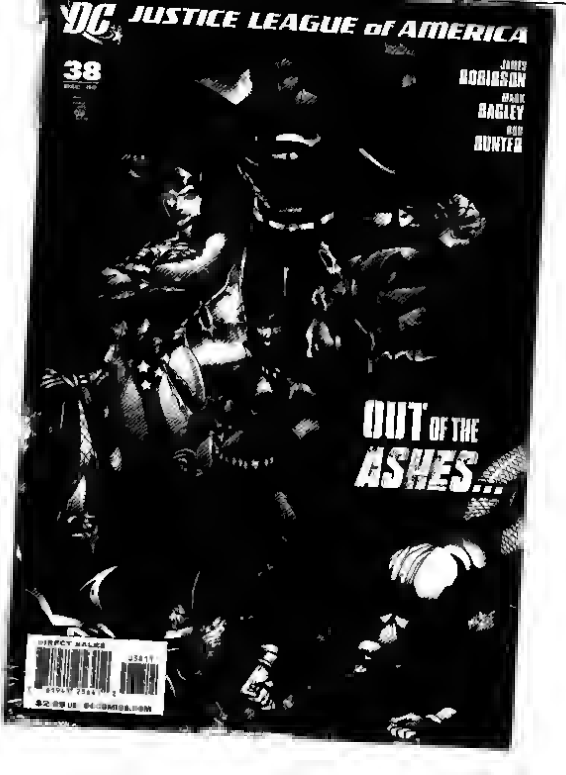
LIST

| | FULL COLOR | TWIN/MONO COLOR | BLACK | TOTAL |
|---|---|---|---|---|
| SMALL | 0 | 0 | 299 | 299 |
| LARGE | 0 | 0 | 0 | 0 |
| TOTAL | 0 | 0 | 299 | 299 |

CALIBRATION COUNTER 2

TO M nfShift

Fnem Paul @ First Ch ldrens


DC
JUSTICE LEAGUE of AMERICA
38
JAMES ROBINSON
MARK BAGLEY
ROB HUNTER
OUT OF THE ASHES...
DIRECT SALES
$2.99 US

WOO"III

11-8-12

# FAX-O-MATIC TEST

1-888-877-1655

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mbnail.png 777776112PNG

IHDR 77777706 77777737

77777603 7777777lx )BLTE 77777777| 77777676 77777777 77777601
77777677 77777777 7777776 02 77777703 77777777 77777611 77777704 77777777
77777613 77777713 77777777 77777623 77777711 77777777 77777633 77777715
77777777 77777635 77777728 77777777 77777644 77777715 77777773 77777642
77777723 77777777 77777655 77777734 77777777 77777653 77777731 77777777
77777663 77777724 77777777 77777664 77777738 77777777 77777671 77777712
77777777 77777677 77777748 77777777 77777763 77777741 77777777 77777712
77777744 77777772 77777717 77777751 77777777 77777721 77777744 77777777
77777724 77777752 77777773 77777711 77777747 77777777 77777731 77777755
77777777 77777746 77777755 77777777 77777744 77777762 77777777 77777763
77777765 77777777 77777768 77777766 77777777 77777764 77777771 77777777
77777776 77777776 77777777 77777777 77777777| 77777634F
@IDATx 77777732 77777755 77777724 77777675n 77777603P

Test Pen

Avi

1-855-330-1239

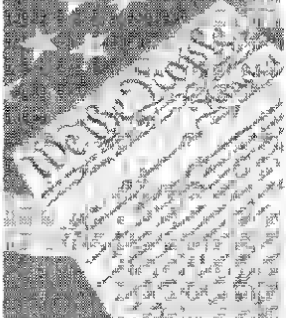
# 1040

NOTE: THIS BOOKLET DOES NOT CONTAIN TAX FORMS

# INSTRUCTIONS

Individual Income Tax Return

# 2011



IRS

Department of the Treasury—Internal Revenue Service

**e-file** makes doing your taxes faster and easier.

**freefile** is the fast, safe, and free way to prepare and e-file your taxes. See www.irs.gov/freefile.

Use a faster, more convenient, and secure paper. For more information, go to IRS.gov/directfile. Free file software and filing your return is free. Learn more at IRS.gov/freefile.

**NEW FORMS**

You may have to report your capital gains and losses on new Form 8949, Sales and Other Dispositions of Capital Assets. You may have to file new Form 8960.

**MAILING YOUR RETURN**

If you file a paper return, you may be mailing the settlement address this year.

**FUTURE DEVELOPMENTS**

The IRS has created a page on IRS.gov for information about Form 1040 and its instructions. Go to IRS.gov/form1040 for more about any future developments affecting Form 1040 (such as legislation enacted after we release it).

For details on these and other changes, see the items listed under *What's New*.

Test from

GreenBush

422

2623

TEST

FAX

75

TRIVIA

E.L

# FAX

**To:** FAX TOY
Company:
Fax: 912132942943
Phone:

**From.**
Fax: 4383
Phone: 612 617-8336
E-mail: ehansen@NMDP.ORG

---

**NOTES:**

TEST

---

**Date and time of transmission:** Wednesday, February 17, 2016 1:32:24 AM
**Number of pages including this cover sheet:** 01

HELLO

FAX!

TEST

12-27-13

# KONICA MINOLTA 364e

## Configuration Page

### Print Operation Menu Map

**Basic Setting**
Default Paper Size = 8 1/2x11
Default Paper Type = Not Specified
Paper Tray = Auto
Output Tray = Elevate Tray
Binding Position = Left Binding
Double-Sided = Off
Staple = Off
Hole Punch = Off
Orientation = Portrait
# of Sets = 1
Not Matching Paper in Tray Setting = Stop Printing (Tray Used)
Spool Setting = On
Collate = Off
RDH Printing = Auto
Banner Setting = Disable
Banner Paper Tray = Auto
Color Settings = Permanent
Toner Save = Off
Edge Enhancement = Off

**PCL Setting**
Font Source = I
Font Number = 0
Font Pitch = 12.00
Font Point = 10.00
Symbol Set = Roman-8
Lines Page = 60 (Lines/Page)
CR/LF Mapping = Off
Wide A Support = On

**PS Setting**
Print Errors = Disable
Font ROM Source = 4
Font Destination Profile = Auto
Image RGB Source = 4
Image Destination Profile = Auto
Graphics RGB Source = 4
Graphics Destination Profile = Auto
Simulation Profile = None

**XPS Settings**
Verify XPS Digital Signature = Disable

**Test Print**
Configuration
PCL Font List
PS Font List
Demo Page

**I/F Setting**
Network I/F Timeout = 60 (sec.)
USB Timeout = 60 (sec.)
Print XPS Errors = Enable

### Installed

Print+ HDD = Installed
Private Memory = 2304 (MByte)

### Printer Information

**Installed Tray**
Tray 1 = 8 1/2x11
Tray 2 = 8 1/2x11
Tray 3 = None
Tray 4 = None
MP = 8 1/2x11

**Option**
Duplex Unit = Installed
Finisher = Available
Punch Unit = Available
Hold Unit = Not Available
Fax Unit = Available
Mailbox Unit = Not Available

### Firmware Version

Main System Version = J
Printer Controller = A9 FUY0-3000-GM1-43

### Network

**MAC Address**
MAC Address = 00:20:6B:94:71:5F

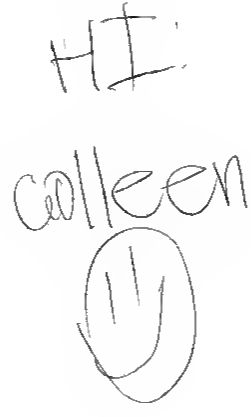
**TCP/IP**
TCP/IP = Enable
IP Address = 192.16.10.50
Subnet Mask = 255.255.255.0
Default Gateway = 172.16.10.1
RAW Port 9 = 9100
RAW Port 1 = 9101
RAW Port 2 = 9102
RAW Port 3 = 9103
RAW Port 4 = 9104
RAW Port 5 = 9105

**Network**
Network = Disable

**AppleTalk**
AppleTalk = Disable

**SMB**
SMB = Disable

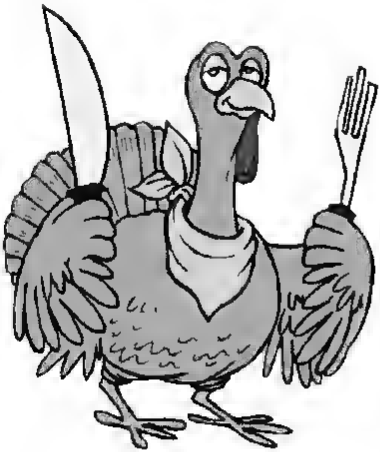
test


HI:
colleen

**********
*** ERROR TX REPORT ***
**********

*INCOMPLETE TRANSMISSION

| | |
|---|---|
| TX/RX NO | 0030 |
| DESTINATION NUMBER | 18552148143 |
| DESTINATION ID | |
| ST. TIME | 02/10 17:55 |
| COMMUNICATION TIME | 00'00 |
| PAGES SENT | 0 |
| RESULT | NG #018 |
| | LINE BUSY |



Husking rice
a child squints up
to view the moon

Bashō

A hazy day—
Even the gods
Must feel listless.

Issa

Alone in old
clothes sipping wine
Beneath the moon

Jack Kerouac

A cold rain starting
And no hat—
So?

Bashō

What a moon—
If only she were here
my bitter wife

Issa

All right, You Sparrows,
The sun has set and you can now
Stop your chattering!

Richard Wright

# Adobe Acrobat PDF Files

Adobe® Portable Document Format (PDF) is a universal file format that preserves all of the fonts, formatting, colours and graphics of any source document, regardless of the application and platform used to create it.

Adobe PDF is an ideal format for electronic document distribution as it overcomes the problems commonly encountered with electronic file sharing.

- ***Anyone, anywhere*** can open a **PDF file**. All you need is the free Adobe Acrobat Reader. Recipients of other file formats sometimes can't open files because they don't have the applications used to create the documents.
- PDF files ***always print correctly*** on any printing device.
- PDF files **always** display ***exactly*** as created, regardless of fonts, software, and operating systems. Fonts and graphics are not lost due to platform, software, and version incompatibilities.
- The free Acrobat Reader is easy to download and can be freely distributed by anyone.
- Compact PDF files are smaller than their source files and download a page at a time for fast display on the Web.

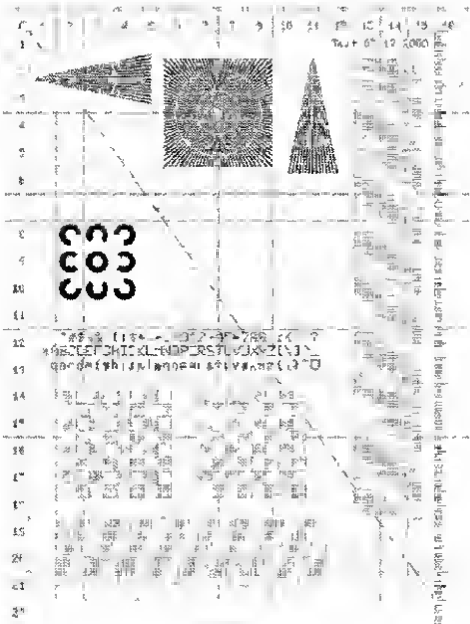
2. Nursing for the Future (Brown Report 1948)
3. A Program for the Nursing Profession (Goldmark Report 1949)
4. Community College Education for Nursing (Mildred Montag, 1959)
5. Position paper on Educational Preparation for Nurse Practitioners and Assistants to Nurses (ANA 1965)
6. An Abstract for Action (Lysaught Report 1970)
7. National Commission on Nursing Implementation Project (1983)
8. Health Professions Education for the Future: Schools in Service to the Nation (Pew Health Professions Commission 1995)
9. Pew Health Professions Commission (1998). 21 Core principles for the 21st Century
10. *Healthy People 2010: The Cornerstone for Prevention*, U.S. Department of Health and Human Services, 2000

D. Nursing organizations (membership, purposes, functions, impact on nursing, health care, education, and politics)

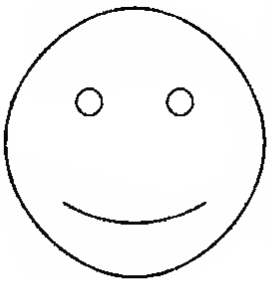
1. International Council of Nurses (ICN)
2. American Nurses Association (ANA)
3. American Association of Colleges of Nursing (AACN)
4. National Council of State Boards of Nursing (NCSBN)
5. National League for Nursing (NLN)
6. Sigma Theta Tau International (STTI)
7. American Academy of Nursing (AAN)
8. National Student Nurses Association (NSNA)
9. National Organization for Associate Degree Nursing (NOADN) (formerly National Organization for the Advancement of Associate Degree Nursing [NOAADN])
10. American Organization of Nurse Executives (AONE)
11. Organizations representing members of historically underrepresented groups (for example: National Association of Hispanic Nurses, National Black Nurses Association, Inc., American Assembly for Men in Nursing [AAMN])
12. Clinical specialty organizations (for example: American Association of Critical Care Nurses, Association of PeriOperative Registered Nurses [AORN], American Association of Occupational Health Nurses)

E. Educational preparation in nursing

1. Historical models (for example: Nightingale, Cadet Nurse Corps Nurse Training/Education Act)
2. Academic nursing programs
   a. Practical/Vocational
   b. Diploma
   c. Associate degree
   d. Baccalaureate degree (generic and RN completion)
   e. Master's degree (generic and advanced practice)
   f. Doctoral degree
3. Accreditation of academic programs (for example: National League for Nursing Accrediting Commission Inc. [NLNAC] Commission on Collegiate Nursing Education [CCNE])
4. Credentialing (for example: AAA ew Education, other specialty groups)
5. Continuing education (for example: mandatory, career ladder)



Test Fax
Please Ignore, Thank You.



Xerox® WorkCentre® 5945

Multifunction Printer

# Configuration Report

Default as of: Apr 28, 2016 at 06:15 PM

xerox

**Protocols (cont.)**

**NTP**

| | |
|---|---|
| Primary Server: | Disabled |
| Alternate Server: | 0.0.0.0:123 |
| SLP: | Disabled |
| SNMP: | Disabled |
| FTP: | Disabled |
| **Web Services on Device:** | Disabled |
| WS-Discovery: | Disabled |
| WS-Discovery Unicast: | Disabled |
| WS-Print: | Disabled |
| WS-Scan: | Disabled |
| **Web Content** | |
| Unlocked Canon Registrations: | Enabled |
| Scan Template Management: | Disabled |
| Scan Secure Access: | Disabled |
| Default Print: | Enabled |
| Scan Assistant: | Disabled |
| Remote Configuration: | Disabled |
| Address Book Config: | Enabled |

## Services

**Printing**

| | |
|---|---|
| Banner Sheet: | Disabled |
| Separator Job: | Disabled |
| Time Stamp: | Disabled |
| Print Submission: | Enabled |
| Log Transmit: | 1,4,1,3,2 |
| Default Copies: | 1 |
| Default Job Type: | Default Print |
| Default Print Size: | a4,SEF,210x297mm |
| Default Print Color: | Mixed |
| Default 2 Sided Printing: | 1 Sided |
| Default Output Tray: | Tray Tray |
| Default Output Color: | Black & Mono |
| Default Collated Sets: | Enabled |
| Default Stapling: | No Staple |
| Punch/Fold: | Disabled |
| Level: | 3 |
| Version: | 20.20.101 |
| Image Quality: | Xerox Some |
| JPS (XML Paper Specification): | User Disabled |
| Level: | JPS 1.0 |
| Version: | 1.0 |
| Image Quality: | Xerox Some |
| PCL: | |
| Default: | 6 |
| Font Size: | 12.00 |
| Pitch Size: | 10.00 |
| Page Size: | 12.00 |
| Form Source: | Auto |
| Line Per Page: | 60 |

**Embedded Fax:** Disabled

| | |
|---|---|
| Fax Line: | |
| Fax Line2: | |

**Internet Fax:** Not Configured

| | |
|---|---|
| Delivery Enabled/Protocol: | SMTP/Default |
| Confirmation Sheet: | On |
| Activity Report: | Disabled |
| Accept Email with no Attach: | Disabled |

**Server Fax:** Not Configured

| | |
|---|---|
| Confirmation Sheet: | Print, Only |
| Retry Prefix: | Disabled |
| Repository Settings: | FTP |
| Repository Server: | Disabled |
| Designated Repository Path: | |

**Workflow Scanning:** Disabled

| | |
|---|---|
| Confirmation Sheet: | Errors Only |
| Default Repository Basic 1: | Shell |
| Default Repository Server: | 123. 123.123.123 |
| Default Repository Path: | |
| Default Repository Login Credentials: | System |
| Alt1 Repository Enabled: | FTP |
| Alt1 Repository Server: | 0.0.0.0:0 |
| Alt1 Repository Unmounted Path: | |
| Alt1 Repository Login Credentials: | System |
| Template Pool Protocol: | FTP |
| Template Pool Server: | Disabled |
| Template Pool Path: | |

**Services (cont.)**

**Email:** Disabled

| | |
|---|---|
| Default Path Service: | Mailbox@Xerox.com |
| Default Path Name: | |
| Confirmation Sheet: | Path Only |
| Auto Send to Self: | Disabled |
| E-mail Security: | Disabled |

**Default to Mailbox:** Disabled

| | |
|---|---|
| Show Mailboxes by Default: | Disabled |
| Storage Capacity (MB): | 2810.49 MB |
| Storage Used (MB): | 1807.89 MB |
| Check all Public Folders: | Selective |
| Unassigned Created Folder: | Selective |
| Unassigned Files: | Only |

**Scan to Home:** Disabled

| | |
|---|---|
| Friendly Name: | |
| Template Name: | |
| Auto Create Subfolder: | Disabled |
| Append User Name to Path: | Disabled |
| Auto Create User Home Dir.: | Disabled |

**Scan To:** Not Configured

**Print From:** Not Configured

| | |
|---|---|
| Saved Jobs for Xerox: | Disabled |
| Print from USB: | Disabled |
| Print From Mailbox: | Disabled |

## Accounting

| | |
|---|---|
| Accounting Mode: | Xerox |
| Network Accounting: | Disabled |

## Security

**Authentication Configuration**

| | |
|---|---|
| Default for All Services: | Locally on the Device |
| Xerox Secure Access: | Disabled |
| Login Method: | Card Only |
| Authentication Prompt: | Disabled |
| Web Page Authentication: | Disabled |
| Touch to Release: | Disabled |
| Web UI Authentication: | Disabled |
| Authentication: | Locally on the Device |
| Remote Authentication Server: | Kerberos |

**Authentication Server**

| | |
|---|---|
| Kerberos Primary Realm: | |
| Kerberos Primary Realm: | Disabled |
| Kerberos KDC Realm: | 0.0.0.0:88 |
| Kerberos KDC Address: | 0.0.0.0:88 |
| Kerberos KDC Protocol: | |
| Kerberos KDC Timeout: | |
| Kerberos KDC Retries: | |
| LDAP Server Name: | |
| LDAP Server Port: | |
| LDAP Server Protocol: | |
| LDAP Search Base: | |
| LDAP Login Credentials: | |
| LDAP Search Timeout: | |
| LDAP Referrals: | |
| LDAP Certificate Verification: | |
| Kerberos Server Address: | 0.0.0.0:443 |
| Kerberos Server Path: | |

**Xerox Secure Access:** Disabled

| | |
|---|---|
| Server Address: | 0.0.0.0:443 |
| Secure Access Path: | |

**Audit Log:** Disabled

**IP Sec:** Disabled

**IP Filtering:** Disabled

**802.1x:** Disabled

| | |
|---|---|
| Authentication Method: | EAP-MD5 |

**Image Overwrite**

| | |
|---|---|
| Immediate: | Disabled/Disabled |
| Scheduled: | Disabled |
| Scheduled Job Frequency: | Weekly |

**Encryption**

| | |
|---|---|
| Encryption: | Disabled |
| Disk Zero Completion: | Disabled/Disabled |
| Secure Connection: | TLS |

**McAfee Embedded Control:** Not Configured

## Media Trays

| | |
|---|---|
| Tray 1 | Plain, Map and Letter (8.5 x 11") |
| Tray 2: | Plain, Green and Legal (8.5 ... 14") |
| Tray 3: | Plain, White and Letter (8.5 x 11") |
| Tray 4: | Recycled, White Uncoated (8.5 x... |
| Tray 5 (Bypass): | Plain, White and Letter (8.5 x 11") |

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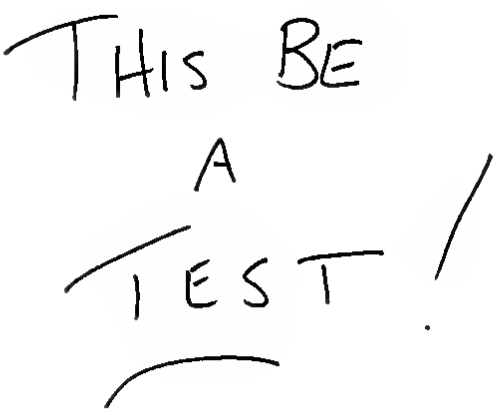
WorkCentre is a trademark of Novell, Inc. NetWare is a trademark of NetWare, Inc. AppleTalk is a trademark of Apple Computer, Inc. Bonjour is a trademark of Apple Inc.

**Procedures/Injection**
ALLERGY TESTS, PERCUTANEOUS, ALLERGENIC EXTRACTS, SPECIFY NUMBER
Order Date: 4/10/2011

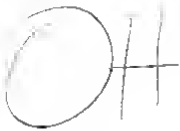
**Respond to**
Specialty Pediatrics
Main Partners
1611 Troy Town
TORT MOUNTAIN, NV 86426

Naturopath Medicine, M.D.
Valid and Electronic Prescription

ATTACHED FILE FORMAT NOT SUPPORTED.


THIS BE
A
TEST!

Test Fax to check connection


Oh
Hai!

| | |
|---|---|
| To | Guy |
| Fax number | 15105450930 |
| | |
| From | |
| Fax number | |
| Business phone | |
| Home phone | |
| | |
| Date & Time | 10/31/2009 12:12:26 AM |
| Pages | 1 |
| Re | Request |

TESTING

FAX

Cellulitis- Keflex 500 mg bid x 10 days, elevate arm

Cont to monitor

**Chronic Disease Management**

The patient was counseled on the importance of active management of their diseases and conditions. This includes the setting attainable goals and monitoring progress toward them, as well as compliance with medication, testing and lifestyle orders.

**Rx**

New

Keflex 500 mg capsule take 1 capsule oral bid (twice a day) for 10 days

**Visit Summary**

The patient has been instructed as per the attached sheet

**Follow Up**

2 weeks

**SERVICE PERFORMED**

CPT 99326

Haley Markham, NP

*Valid only if transmitted by facsimile machine

Save the drama for your llama

HP Photosmart C309a series

**Fax Log for**
Microsoft
7034418796
Jan 18 2011 2:58PM

Last Transaction

Test

| Date | Time | Type | Station ID | Duration | Pages | Result |
|---|---|---|---|---|---|---|
| Jan 18 | 2:56PM | Fax Sent | 7034982228 | 0:54 | 2 | No document |

**Note**

Image on Fax Send Report is set to Off

An image of page 1 will appear here for faxes that are sent as Scan and Fax.

Test

Test fax page

Hel o world. .

# FAX TEST

**HP LaserJet** ***M1522nf MFP***

# Fax Confirmation Report

Mark Salguero
707 252 8748
Apr-13-2009 1:38PM

| Job | Date | Time | Type | Identification | Duration | Pages | Result |
|---|---|---|---|---|---|---|---|
| 15 | 4/13/2009 | 1:29 26PM | Se nd | 18185431990 | 00 | 0 | Stop |

510-
545-
0990

586 337-[illegible]
ERIN SOLAIMAN

Data Detail Continued

Time	To/From	Type/Unit	Rate Code	
Data Plans				
Friday [illegible]				
11:07a	Data Transfer	20.4150KB	SDGUNL	0.00
11:30a	Data Transfer	20.0000KB	SDGUNL	0.00
11:06a	Data Transfer	20.1700KB	SDGUNL	0.00
12:00p	Data Transfer	20.0000KB	SDGUNL	0.00
01:20p	Data Transfer	20.0740KB	SDGUNL	0.00
01:30p	Data Transfer	20.9370KB	SDGUNL	0.00
03:20p	Data Transfer	77.1000KB	SDGUNL	0.00
05:00p	Data Transfer	200.0120KB	SDGUNL	0.00
06:30p	Data Transfer	10.5500KB	SDGUNL	0.00
05:00p	Data Transfer	20.7870KB	SDGUNL	0.00
06:55p	Data Transfer	10.5360KB	SDGUNL	0.00
07:00p	Data Transfer	21.0000KB	SDGUNL	0.00
08:51p	Data Transfer	0.0000KB	SDGUNL	0.00
Saturday [illegible]				
12:57a	Data Transfer	10.4700KB	SDGUNL	0.00
04:06a	Data Transfer	20.5000KB	SDGUNL	0.00
12:00p	Data Transfer	20.5810KB	SDGUNL	0.00
01:17p	Data Transfer	30.2340KB	SDGUNL	0.00
01:47p	Data Transfer	20.0700KB	SDGUNL	0.00
01:20p	Data Transfer	10.5000KB	SDGUNL	0.00

Time	To/From	Type/Unit	Rate Code	
Data Plans				
Tuesday [illegible]				
12:54p	Data Transfer	20.0360KB	SDGUNL	0.00
01:30p	Data Transfer	10.5000KB	SDGUNL	0.00
01:30p	Data Transfer	10.1200KB	SDGUNL	0.00
02:25p	Data Transfer	13.5520KB	SDGUNL	0.00
02:30p	Data Transfer	10.0470KB	SDGUNL	0.00
03:34p	Data Transfer	10.5000KB	SDGUNL	0.00
03:00p	Data Transfer	10.5360KB	SDGUNL	0.00
04:07p	Data Transfer	10.0350KB	SDGUNL	0.00
05:10p	Data Transfer	17.0010KB	SDGUNL	0.00
Wednesday [illegible]				
01:10a	Data Transfer	14.0320KB	SDGUNL	0.00
05:30a	Data Transfer	121.7100KB	SDGUNL	0.00
07:10a	Data Transfer	20.7540KB	SDGUNL	0.00
08:10a	Data Transfer	20.0400KB	SDGUNL	0.00
08:47a	Data Transfer	10.5500KB	SDGUNL	0.00
08:10a	Data Transfer	10.5790KB	SDGUNL	0.00
09:30a	Data Transfer	20.5000KB	SDGUNL	0.00
10:00a	Data Transfer	30.1210KB	SDGUNL	0.00
10:45a	Data Transfer	10.5000KB	SDGUNL	0.00
11:10a	Data Transfer	10.7340KB	SDGUNL	0.00
12:20p	Data Transfer	10.2000KB	SDGUNL	0.00
12:30p	Data Transfer	10.5400KB	SDGUNL	0.00
12:47p	Data Transfer	3.7160KB	SDGUNL	0.00
Sunday [illegible]				
12:40p	Data Transfer	122.0000KB	SDGUNL	0.00

SMC Electric Supply Monett

602 13th Street

Monett Missouri 65708

4172358796

## Sale

| | |
|---|---|
| Date | 06/05/2017 10:31 |
| Merchant ID | 12721298 |
| Terminal ID | 00000001 |
| Invoice No | 42034384-0 |
| Amount | $180.00 |
| Card Number | **********1426 |
| Response Msg | Approved |
| Auth Code | 012894 |
| Processed as | MASTERCARD |
| Entry Method | Manual |
| Trace No | 716015403629 |
| Reference No | 1648159380 |
| Match AVS | Match Z |
| Match ZIP | Match Z |
| Match CVV | Not Present |
| Client ID | 10997|1 |
| User ID | Infor |

Cardholder Signature

Hello World

**Billing address**

zilent shield
AbilionZ
186 hickory hollow place
antioch TN 37013

**Shipping address**

zilent shield
AbilionZ
186 hickory hollow place
antioch TN 37013

faxZERO

Send a fax for free

Recipient Information

To: Norma Leal
Fax #: 5207978493

Sender Information

From: Morgan Grantham
Email address: incantator_mcg@yahoo.com (from 68.63.207.74)
Sent on: Monday, July 29 2013 at 2:02 PM EDT

Test fax.

Test page 1

This fax was sent using the FaxZero.com free fax service. FaxZero.com has a zero tolerance policy for abuse and junk faxes. If this fax is spam or abusive, please e-mail support@faxzero.com or send a fax to [illegible]. Specify fax #[illegible]. We will add your fax number to the block list.

**Brother International Corporation**

**Auto Reply Document**

You received this fascimile confirming that your faxed-in product registration was received or your faxed-in test sheet was received

NOTE: If you faxed-in a product registration form and included your email address then you will also receive a confirmation by email once we complete your registration

We encourage you to visit the Brother Solutions Center at http://solutions.brother.com to learn more about your product and its operation.

The Brother Solutions Center is a web site that offers free downloads of Operational User Guides, Software User Guides, New Driver Releases, Firmware Updates and more.

After consulting the Brother Solutions Center or your User's Guide, should you have any questions regarding the operation of your product, please contact our Customer Service department at www.brother-usa.com/askus

Brother takes your privacy seriously. To learn more about how Brother treats personal information, please visit our web site at www.brother.com

Thank you for choosing Brother!

**OhioHealth Laboratory Services**
3535 Olentangy River Rd. Columbus, Ohio 43214
Phone: (614) 857-8236 or (800)-443-8236
Fax: (614) 265-2810

| | |
|---|---|
| Name | **RIVERSIDE ENCOUNTER** |
| Encounter # | **E000405** |
| Acct # | 3411118 |
| DOB | **12/8/1956** Sex: F |
| Ordering Doctor | **BARKER WILLARD MD** |
| Location | **EDEP** |
| Specimen Source | **1213296243** |
| Encounter Date/Time | [redacted] |

| | In Range | Out of Range | Reference | Units |
|---|---|---|---|---|
| **CHART ID#** | | | | |
| Collected: 03/04/2015 15:24 EST | | | | |
| Released: None Given | | | | |
| **CYCLIC CITRULLINATED PEPTIDE (CCP) ANTIBODIES** | | | | |
| CCP Antibody | | **28.8 H** | 0.0-14.9 | AU/ml |

**PENDING WORK**

| Collection Date | Test Name | Status |
|---|---|---|
| 03/04/2015 15:24 EST | Thyroglobulin Antibody (TG-Ab) | Received |
| 03/04/2015 15:24 EST | Testosterone, Total | Received |

**CANCELED WORK**

| Collection Date | Specimen | Test Name | Reason |
|---|---|---|---|
| 03/04/2015 15:24 EST | Blood | Sex Hormone Binding Globulin | Order Error |

## CONFIRMATION CODE: 70

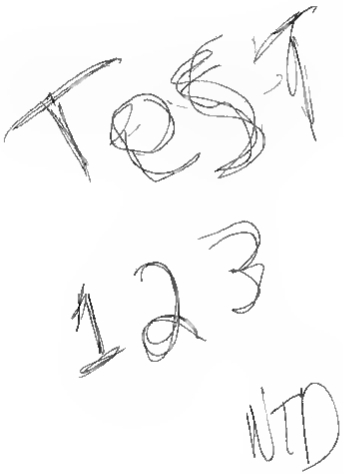
You will receive an automated phone call shortly. Please enter the code above to confirm the order.
For questions or assistance, please contact DoorDash at (650) 681 9470

**ORDER INFORMATION**

Customer: Stan Tang
Delivery #: 40147
Restaurant: Bangkok Cuisine

**Pickup Time: 2:33PM (Tue Feb 11)**

| Quantity | Item | Price | Subtotal |
|---|---|---|---|
| 1 x | **Fresh Rolls - Duck** (Appetizers) | $8.95 | $8.95 |
| 1 x | **Fried or BBQ Squid** (Appetizers) | $8.95 | $8.95 |
| | Subtotal | | $17.90 |
| | + Tax (9.750%) | | $1.57 |
| | + Commission (10.000%) | | $1.78 |
| | Total | | $17.68 |


TEST
123
WTD

888-877-1655

EAT
YOUR
SANDWICH

Test for Manually Printing from HostFax

Lora Hart

## Counter

Serial No. W3028806135
Date of Today Mar 21,2017 09:17 AM

| | |
|---|---|
| Total | 16504 |
| Prints | 9022 |

TEST

# Fax Send Confirmation Report

Date/Time: 08/08/2011 10:13 AM
Local Name: CLK 9504
Machine Fax Number: 5NC0301CA00004VR
Host Name: SBC001599CF7C92

| Job | Destination | Start Time | Time | Mode | Page | Result |
|---|---|---|---|---|---|---|
| 2006 | 3018015, 50 | 08-08-2011 10:12 AM | 01'07" | G3 | 03 | OK |

8150

TEST FAX

Terms and Conditions Privacy Statement | 2010 PPL Corporation

HI THERE!

SORRY, I COULD ONLY GET ONE PAGE LOADED. THE LIGHT IS ABOUT TO CHANGE AND I'M FIRST UP IN THE TURN LANE.

Monday, August 20, 2012

Fax To: Beta Yosemite Westgate Lodge
Fax: +1(559)-877-1855
Attn: Raj Patel
Subject: Booking Confirmation

| Reservation Confirmation |
|---|
| 51108FAA77DD-265 |
| Created: 08/20/2012 12:43:16 GMT |

Dear Raj Patel,

We have received the following reservation for your property and are transmitting this Reservation Confirmation via facsimile. If you have any questions regarding this reservation, please contact our Reservation Support Team at Tel: 1-800-767-8307 or Email: support@innsight.com

Thank You,
INNSight.com

## GUEST INFO

It is your obligation to safeguard this fax and keep this guests credit card information secure in accordance with your internal security procedures

| | | | |
|---|---|---|---|
| Booked by: | Test test | State: | test |
| Address: | test | Zip code: | 2343 |
| City: | test | Country: | AUSTRIA |
| INNsight User name: | NA | Telephone Number: | 224342343 |

## BILLING INFORMATION

| | | | |
|---|---|---|---|
| Credit Card: | Visa | Expiry Date: | 2012-08 |
| Credit Number: | 4111111111111111 | CVC Code: | 12 |

## ROOM DETAILS

| | | | |
|---|---|---|---|
| Number of Rooms: | 1 | Number of Nights: | 1 |
| Check In Date: | August 20, 2012 | Check Out Date: | August 21, 2012 |

**Room 1: Queen Standard** — Adults: 2 — Children: 0

| | | | |
|---|---|---|---|
| First Name: | test | Last Name: | test |

Our Standard rooms are spacious rooms with 2 Queen sized beds large enough to accommodate 4 adults. The furniture includes a contemporary styled night stand/ armoire and desk with its own plug outlet desk lamp. Each room has a single soft armchair and desk chair + Inclusive: Desk w/lamp, 32 inch LCD TV w/HBO, Coffee & Tea
Not included: Breakfast is NOT included

| Room Details | Date | Aug 20 |
|---|---|---|
| | Rate | $ 15.00 |

**Sub-Total: $15.00**
**Tax (10%): $ 1.5 = Total: $ 16.50**

Note: Rates include Extra Person/Child Fees

Special Requests: test

Thanks for selecting INNsight.com as your partner

1-213-
294-
2943

TRUNG TÂM VĂN HÓA PHẬT GIÁO VIỆT NAM
CHÙA THANH ĐỨC
6034 Beech Daly Rd Taylor , Mi 48108
Home (313) 722-4812 Cell (248) 990-5456

**THÔNG BÁO THAY THƯ MỜI**
LỄ ĐỨC PHẬT THÀNH ĐẠO & TU HỌC AN LẠC MỘT NGÀY

NAM MÔ BỔN SƯ THÍCH CA MÂU NI PHẬT

Kính Thưa Quý đồng hương phật tử

Để tưởng niệm ngày Đức Phật Thành Đạo và Tu Học An Lạc một ngày. Chùa Thanh Đức sẽ tổ chức vào Chủ Nhật ngày 17 tháng 01 năm 2016 ( Nhằm ngày 8 tháng 12 năm Ất Mùi) Dưới sự chứng minh của **Đại Đức Thích Pháp Hòa** đến từ Tu Viện Trúc Lâm Canada . Trân trọng kính mời quý Phật tử dành chút thời gian quý báo đến tham dự và góp phần cầu nguyện. Kính chúc quý vị luôn an lạc và hạnh phúc trong ánh hào quang của mười phương chư Phật.

**Chương Trình**

**Thứ Bảy ngày 16 tháng 01 năm 2016**
8:00 tối Tụng Kinh Địa Tạng.
**Chủ Nhật ngày 17 tháng 01 năm 2016**
9:00 Sáng Tụng Kinh Địa Tạng
10 00 Sáng Giảng Pháp
11 00 Cúng Cúa Đường ( có chương trình riêng)
12 00 Trưa Nghỉ trưa
1 00 chiều tụng Kinh
2.00 chiều Lễ Quy Y
4 00 chiều Mông Sơn Thí Thực
6 00 tối Lễ Phật Thành Đạo
8 00 tối Giảng Pháp
**Thứ Hai ngày 18 tháng 01 năm 2016**
8:00 tối Phật Học Vấn Đáp

CHÙA THANH ĐỨC

TM Chùng Ni Thích Nữ Lệ Khiết

TEST FAX

MIKE

One

Two

Three

reports → charges + deposits → grand totals

always

end of day statistics

always

end of day statistics

grand previews

reports → charge + deposits → grand totals → grand prize

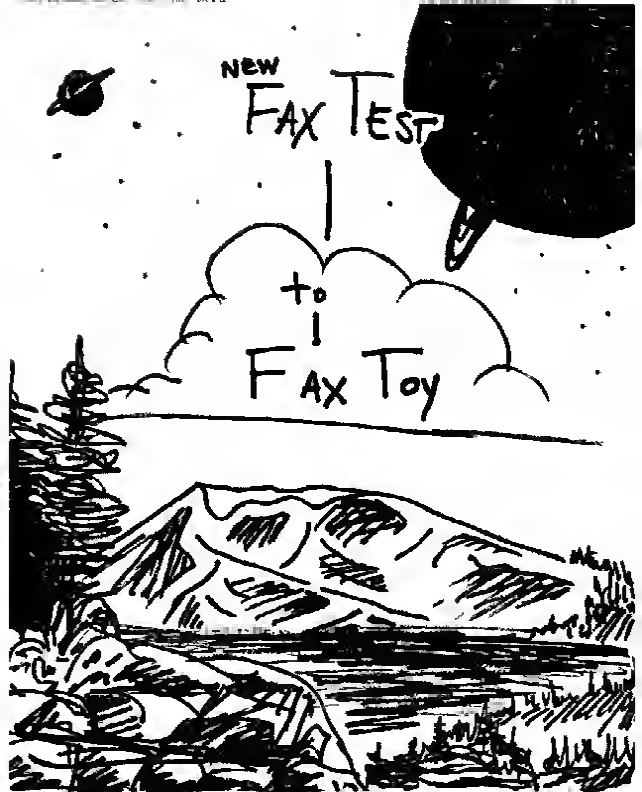
# REVENUE ANALYSIS

| | GRAND TOTALS | RETAIL $ | % RETAIL | $ PET RIDERS | # PLAY TIMES | $ PLAY TIMES | # DIPS | EXIT RATIO | FULL RATIO | GROSS | GROSS SALES |
|---|---|---|---|---|---|---|---|---|---|---|---|
| MON | | | | | | | | | | | |
| TUES | | | | | | | | | | | |
| WED | | | | | | | | | | | |
| THURS | | | | | | | | | | | |
| FRI | | | | | | | | | | | |
| SAT | | | | | | | | | | | |
| SUN | | | | | | | | | | | |
| TOTALS | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 |

always previous day

WEEK OF_____

FACILITY_____


NEW
FAX TEST
to
FAX TOY

I had my shins blown off by a Japan-man's machine gun... So what?!

# HP LaserJet Professional M1212nf MFP

## Fax Error Report

| Job | Date | Time | Type | Identification | Duration | Pages | Result |
|---|---|---|---|---|---|---|---|
| 2 | 03/09/2017 | 09:17:22AM | Receive | HPFAX | 0:23 | 1 | Comm. Error |

No Image Available

Citizenship and Immigration Canada | Citoyenneté et Immigration Canada

Official Receipt - Reçu officiel

R113674006

**ON-LINE - CIC EN LIGNE**
**1-888-242-2100 Hours (local time)/Heures (heure locale) 08:00 - 16:00**

| | |
|---|---|
| **ACCT - COMPTE** | VISA $400.00 |
| **CARD NUMBER - NUMÉRO DE LA CARTE** | 45##########2652 |
| **RECEIPT NUMBER - NUMÉRO DU REÇU** | R113674006 |
| **DATE OF PAYMENT - DATE DU PAIEMENT** | 2014-10-12 16:21:04 EDT |

Approved - Thank You - Approuvée Merci

Payer Information - Renseignement de l'agent payeur

| **Name - Nom** | **Client date of birth - Date de naissance du client** D-J M Y A | **Client ID - Identification du client** |
|---|---|---|
| MUHAMMAD T MEHDI | | |

**Address - Adresse**

| **Postal Code - Code postal** | **Area Code - Ind. rég.** | **Telephone No. - No de téléphone** |
|---|---|---|
| | ( ) | - |

Please print two copies of this receipt, send one to Citizenship and Immigration Canada and keep one for your records. Please also note that the payer's name on this receipt does not have to be the same as the one on the application form. - Veuillez imprimer 2 copies de ce reçu, envoyer une copie à Citoyenneté et Immigration Canada et conserver l'autre pour vos dossiers. Veuillez aussi noter que le nom du payeur sur ce reçu n'a pas à être le même que celui sur le formulaire d'application

# BE BACK IN 10 MINUTES

Test

Small

fax

FRIDAY

213-294-2943



# DOGS

*** FAX ERROR TO 18439 ***

TX FUNCTION WAS NOT COMPLETED

| | |
|---|---|
| JOB NO | 1735 |
| DESTINATION ADDRESS | 3038273667 |
| SUBADDRESS | |
| IDENTIFICATION | |
| ST. TIME | 11/06 15:21 |
| TX TIME | 00'00 |
| PGS. | 0 |
| RESULT | NG |
| | 0 #010 ERROR/NO RESPONSE |

# A facsimile from

**Sasli Properties LLC**
Mark Snyder
773 251 1551
msnyder27fl@yahoo.com

**To:** Tammie Turner
Fax number: 303 827 3267

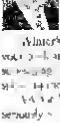
**Date:** 11/6/2015

**Regarding:** W9 for Sasli Properties – Regarding 344 E Locust #7

**Comments:** Please call me with any questions

PUMPKIN

## To our readers

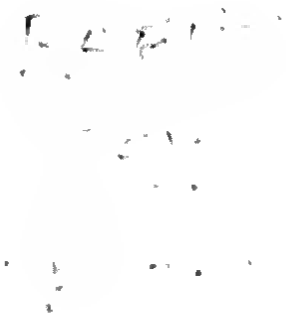


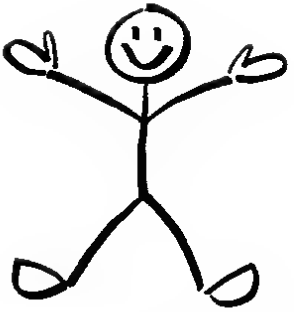
Welcome to the [illegible] issue of *[illegible] Theatre*. As we look in the new 2015, we know one of your busy schedule to [illegible] your health, would be the [illegible] year.

Learn more about VA Veterans [illegible] programs [illegible] and we [illegible] [illegible] use your. Ask some providers in this issue [illegible] [illegible] better [illegible] from [illegible].

Winter's [illegible] [illegible] [illegible] [illegible] for [illegible] [illegible] and [illegible]. Read the [illegible] [illegible] [illegible] [illegible] [illegible] for ways to [illegible] [illegible] and [illegible].

VA [illegible] VISN [illegible] [illegible] mental health [illegible] seriously. [illegible] [illegible] [illegible] to help Veterans in [illegible] [illegible]. On page [illegible] [illegible] [illegible] [illegible] [illegible]





## V.17 Test (ECM OFF)

This test is for science fair project. I am testing to determine if I can send and receive a fax over a digital (VoIP) telephone network.

to 825-3537

fa 825-2763

Test

TNCC

5-12-17

20170810_133225

8553301253

Lorem ipsum dolor sit amet, consectetur adipiscing elit. Nulla pulvinar a ue sit amet turpis mattis, a semper nisi s interdum. Nulla cursus tempus dictum. Quisque at risus ac magna venenatis porta. Aenean et pulvinar quam. Pellentesque habitant morbi tristique senectus et netus et malesuada fames ac turpis egestas. Duis nec urna auctor, cursus magna sit amet, tincidunt enim. Sed interdum atenie nunc eget id convallis dolor. Cras lacinia eu neque a porta. Maecenas consequat vehicula diam lacus eu lobortis.

Integer consequat, elit tempor elementum facilisis, mauris urna interdum mauris, in venenatis urna urna nec enim. Quisque consequat, sapien et finibus feugiat, nisl massa rhoncus lorem, sit amet interdum neque nisl non lacus. Aenean faucibus quis turpis volutpat euismod. Integer qu s consectetur urna. Curabitur eget finibus neque. Fusce eu tellus egestas, convallis elit et, mollis libero. Vestibulum eu finibus quam. Cras eros nunc, ullamcorper eu ipsum interdum, pellentesque eleifend nunc. Donec luctus finibus arcu nec tempor eros p dvinar eu. Suspendisse facilisis leo elementum dignissim dapibus

Quisque dapibus eget nisl ut tristique. Nunc nisl augue, malesuada in justo in, venenatis sodales elit. Donec aliquam turpis ac ullamcorper fermentum. Cras sit amet erat urna. Proin quis est eget m nc plat erat sodales. Pellentesq e arcu uri justo in nunc vel vestib dum sodales, metus. Mauris id odio id elvs pretium venenatis ac non enim. Pellentesque eget nibh vitae arcu semper malesuada vel vitae nisl. Nam accumsan posuere diam et finibus. Aenean ultrices gravida ex eu gravida. Nulla pulvinar leo quis lacus sollicitudin dictum

Morbi eu diam mentis. Proin vel eros tempus, molestie neque sed, dictum dui. Fusce finibus ipsum faucibus nibh imperdiet mollis. Integer condimentum euismod lorem v tae bibendum. Praesent ac lectus sed quam hendrerit ultricies. Proin pulvinar in enim sit amet egestas. Nunc o nare ullamcorper u, at sagittis est posuere nec. Sed tempor ipsum lorem, in commodo diam sodales et. Etiam co ndimentum m nisl non tortor interdum, id pretium nisl dictumus. Maecenas in finibus ligula. Donec non quam blandit tincidunt, arcu ac interdum enim.

Phasellus sit amet velit metus. Maecenas bibendum tristique neque ac bibendum. Donec sollicitudin blandit orci id mattis. Nulla varius volutpat dolor. Mauris eget interdum nisl. Sed vitae eu amet urna. Sed vel pulvinate nibh in massa maximus vel tempor ex ultrices. Ut fringilla ac elit id facilisis. Donec in feugiat ou, at facilisis nisl. Maecenas sed ligula a purus maximus ullamcorper. Aenean in mauris ir utique sollicitudin sapien ac, maximus metellus. Sed nec lacinia vel lacus egestas faucibus vel s t amet justo. Donec rutrum mauris sit amet purus euismod, in ere fringilla metus mattis. Lorem ipsum dolor sit amet, consectetur adipiscing elit

**Equipment Plus**
9817 S north 10th Street
Mcallen, Tx. 78504

Phone # 956-386-0048

Fax # 956-359 6804

# Invoice

| Date | Invoice # |
|---|---|
| 2/12/2008 | 45806 |

**Bill To**
Aaron's Brake & Alignment
201 West Business Hwy
La Feria TX 78552

**Ship To**
Aaron's Brake & Alignment
201 West Business Hwy
La Feria Tx 78552

| P.O. No. | Terms |
|---|---|
| | Due on receipt |

| Description | Qty | Rate | Amount |
|---|---|---|---|
| Cable Assy'e Y-Head WC Short | 2 | 114.00 | 228.00T |
| shipping/ handling over night shipping | | 45.00 | 45.00 |

Thank you for your business.

| | |
|---|---|
| Subtotal | $273.00 |
| Sales Tax (8.25%) | $18.81 |
| Total | $291.81 |
| Payments/Credits | $0.00 |
| **Balance Due** | $291.81 |

# My TEST

mm.c.

Hail Mary

Today begins the 90th Anniversary of the apparition of the Virgin of Fatima

When you receive this email say a Hail Mary and ask for a special favor

"Hail Mary, full of grace, The Lord is with thee. Blessed art thou among women and blessed is the fruit of thy womb, Jesus. Holy Mary, Mother of God, pray for us sinners, now and at the hour of our death, Amen." (your request)

Please do not break the Novena , send it to 12 people you think deserve justice, peace, love, health, prosperity and truth. When you are down to nothing, God is up to something. This has been traveling since 5/13/07!

1-855-330-1239

IAC

fax test

6/15/18

# CANCELLATION

Thursday, September 10, 2015

To: Dhaliwal Hotel & Suites
or: +1(855)-385-1230
From: Akash Patel
Subject: Cancellation Confirmation

| Cancellation Confirmation |
| --- |
| 1E2F8A45-9CD8-3E3 |
| Created: Thu, 10 Sep 15 12:21:07 GMT |
| Pay Source: Standalone |

Dear Amit Patel,

We have received the following cancellation request. Please note that if you do not receive a confirmation number for your cancellation request, please contact us at 1-855-385-1230 or email help@travelclick.com

Thank You
Guest Services

Room Details

| | | | |
| --- | --- | --- | --- |
| Number of Rooms | 1 | Number of Nights | 1 |
| Check-In Date | September 10, 2015 | Check-Out Date | September 11, 2015 |

Guest Information

| | | | |
| --- | --- | --- | --- |
| First Name | Test | Last Name | Test |

Special Requests
Not Available

| | | | |
| --- | --- | --- | --- |
| Date | Today | September 10 | |
| | | VCC | 4000 |

Sub-Total $0.00
Tax 17.5% $0.00 Total $0.00

Payment Details: Not Available

Terms and Conditions: Not Available

TEST

Test

Test
2
χ

testing spandsp #4

### Other inter-type Declarations

*In aspectj*

**declare parents** : *C* extends *D*;
declares that the superclass of C is *D*. That is only legal if *D* is defined to extend the original superclass of *C*

**declare parents**: *C* implements *I*, *J*
*C* implements *I* and *J*

**declare warning**: *init(* Point *) && !withIn(Point)* : "bad ext"
the compiler warns "bad ext" if it finds a use to any field of *Point* outside of the code for *Point*

**declare error**: *callSuperInterp.new(..)*: "bad construction"
the compiler signals an error "bad construction" if it finds a call to any constructor of *Singleton*

**declare soft**: *IOException : executionFoo.new(..)*;
any IOException thrown from executions of the constructors of *Foo* are wrapped in org.aspectj.SoftException

**declare precedence**: *Security, Logging, **
at such join point advice from *Security* has precedence over advice from *Logging*, which has precedence over other advice,

general form

**declare parents**: *TypePat* extends *Type*
**declare parents**: *TypePat* implements *TypeList*
**declare warning**: *Pointcut, String*
**declare error**: *Pointcut, String*
**declare soft**: *Type, Pointcut*
**declare precedence**: *TypePatList*

### Primitive Pointcuts

**call** ( *void Foo.m(int)* )
a call to the method *void Foo.m(int)*

**call** ( *Foo.new(..)* )
a call to any constructor of *Foo*

**execution** ( * *Foo.*(..) *throws IOException* )
the execution of any method of *Foo* that is declared to throw *IOException*

**execution** ( *public Foo.new(..)* )
the execution of any non-public constructor of *Foo*

**initialization** ( *Foo.new(int)* )
the initialization of any *Foo* object that is started with the constructor *Foo(int)*

**preinitialization** ( *Foo.new(int)* )
the pre-initialization (before the **super** constructor is called) that is started with the constructor *Foo(int)*

**staticInitialization**( *Foo* )
when the type *Foo* is initialized, after loading

**get** ( *int Point.x* )
when a *Point.x* is read

**set** ( *private * Point.* )
when any non-private field of *Point* is assigned

**handler** ( *IOException+* )
when an *IOException* or a subtype is handled with a catch block

**adviceexecution**()
the execution of all advice bodies

**within** ( *com.bigfoot.**.* )
any join point where the associated code is defined in the package *com.bigfoot*

**withincode** ( *void Figure.move()* )
any join point where the associated code is defined in the method *void Figure.move()*

**withincode** ( *com.bigfoot.*.new(..)* )
any join point where the associated code is defined in any constructor in the package *com.bigfoot*

**cflow** ( *call(void Figure.move())* )
any join point in the control flow of each call to *void Figure.move()*. This includes the call itself

**cflowbelow** ( *call(void Figure.move())* )
any join point below the control flow of each call to *void Figure.move()*. This does not include the call

**if** ( *Tracing.isEnabled()* )
any join point where *Tracing.isEnabled()* is true. The boolean expression used can only access static members, variables bound in the same pointcut, and thisJoinPoint forms.

**this** ( *Point* )
any join point where the currently executing object is an instance of *Point*

**target** ( *java.io.InputPort* )
any join point where the target object is an instance of *java.io.InputPort*

**args** ( *java.io.InputPort, int* )
any join point where there are two arguments, the first an instance of *java.io.InputPort*, and the second an *int*

**args** ( *, int* )
any join point where there are two arguments, the second of which is an *int*.

**args** ( *short, ..., short* )
any join point with at least two arguments, the first and last of which are *shorts*

**Note**, any primitive in **this**, **target**, and **args** can be replaced with a variable bound in the advice or pointcut.

general form.
**call**(*MethodPat*)
**call**(*ConstructorPat*)
**execution**(*MethodPat*)
**execution**(*ConstructorPat*)
**initialization**(*ConstructorPat*)
**preinitialization**(*ConstructorPat*)
**staticinitialization**(*TypePat*)
**get**(*FieldPat*)
**set**(*FieldPat*)
**handler**(*TypePat*)
**adviceexecution**()
**within**(*TypePat*)
**withincode**(*MethodPat*)
**withincode**(*ConstructorPat*)
**cflow**(*Pointcut*)
**cflowbelow**(*Pointcut*)
**if**(*Expression*)
**this**(*Type* | *Var*)
**target**(*Type* | *Var*)
**args**(*Type* | *Var*, ...)

where *MethodPat* is,
[*ModifiersPat*] *TypePat* [*TypePat* .] *IdPat* ( *TypePat* | .., ... )
[ **throws** *ThrowsPat* ]

*ConstructorPat* is
[*ModifiersPat*] [*TypePat* .] **new** ( *TypePat* | ... )
[ **throws** *ThrowsPat* ]

*FieldPat* is,
[*ModifiersPat*] *TypePat* [*TypePat* .] *IdPat*

*TypePat* is one of:
*IdPat* [ + ] [ [] ... ]
* *TypePat*
*TypePat* && *TypePat*
*TypePat* || *TypePat*
( *TypePat* )

TEST
ABC
1-503-200-1300

# Device Settings

## Devices

Insulet Omnipo

| | |
|---|---|
| Serial Number | [illegible] |
| Device time offset | 0:00 |
| Last sync time | 11:46 AM Thursday Oct. 27 2016 |

Dexcom G6 (...)

| | |
|---|---|
| Serial Number | [illegible] |
| Device time offset | +6:01:39 |
| Last sync time | 11:46 AM Thursday Oct. 27 2016 |

## Basal Rates

| Title | VALUE (u/hr) |
|---|---|
| Total | 0 |

## Bolus Settings

Insulet Carb Ratio (g)

| Title | VALUE (g/U) |
|---|---|

Sensitivity (BG Correction)

| Title | VALUE (mg/dL/U) |
|---|---|

Active Insulin Time

| TOTAL TIME |
|---|
| 0.0 hours |

BG Target

| Title | VALUE (mg/dL) |
|---|---|

Test

# Fax

Recipient: MetroFax

Sender: Justin C

Address:

FAX: 18888771655

TEL: 18888771655

FAX: 18888888771655

Number of Sheets: 1 page(s) including cover

Date: Sunday, January 15, 2012

Subject: IM COOL

This is a message regarding that im cool

TRANSMISSION VERIFICATION REPORT

TIME 06/17/2012 08:52PM
NAME [redacted]
FAX [redacted]
SER.# [redacted]

| | |
|---|---|
| DATE,TIME | 06/17 08:52PM |
| FAX NO /NAME | [redacted] |
| DURATION | 00:00:00 |
| PAGE(S) | 00 |
| RESULT | BUSY |
| MODE | STANDARD |

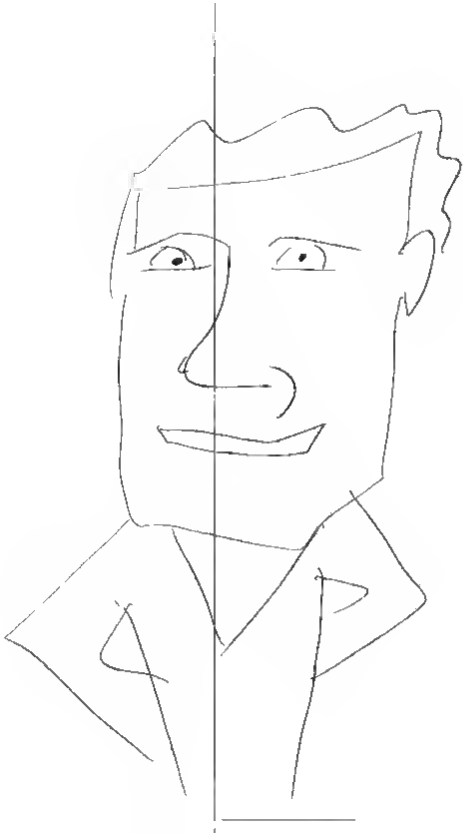
BUSY: BUSY/NO RESPONSE

ARRIS

# END USER LICENSE AGREEMENT (EULA) AND WARRANTY INFORMATION

Touchstone Telephony Modems (TM)
Touchstone Cable Modem (CM)
Touchstone Wideband Modems (TWM)
Touchstone Data Gateways (DG)
Touchstone Telephony Gateways (TG)

The information, system requirements, and compatibility with computer, telecommunications, cable, and satellite systems, contained in this ARRIS User Guide, are subject to change without notice. ARRIS, the ARRIS logo, Accelerail, Bigband Networks, Bigband Networks and Design, ARRIS Multi-Stream Multiplier, ARRIS Multi-Stream Multiplier and Design, CFS, CFS Only, CODRV, DNP, DOCSIS Congressional, Headend In A Box, HMS, HMS and Design, iMOD, iMOD and Design, IMPEDIMAX, IMPEDIMAX and Design, iMOD, iMOD and Design, iMOD Installer, iMOD Installer and Design, iMOD Partner, iMOD Partner and Design, iMOD Technician, iMOD Technician and Design, iMOD Viewer, iMOD Viewer and Design, iMOD Viewer Plus, iMOD Viewer Plus and Design, iMOD Viewer Plus and Design, iMOD Viewer Plus and Design



# HEALTH INSURANCE CLAIM FORM

APPROVED BY NATIONAL UNIFORM CLAIM COMMITTEE (NUCC) 02/12

PICA

1 MEDICARE (Medicare #) | MEDICAID (Medicaid #) | TRICARE (ID/DoD#) | CHAMPVA (Member ID#) | GROUP HEALTH PLAN (SSN or ID) | FECA BLK LUNG (SSN) | OTHER (ID#)

1a. INSURED'S I.D. NUMBER (For Program in Item 1)

2. PATIENT'S NAME (Last Name, First Name, Middle Initial)

3. PATIENT'S BIRTH DATE (MM DD YY) | SEX M F

4. INSURED'S NAME (Last Name, First Name, Middle Initial)

5. PATIENT'S ADDRESS (No., Street)

6. PATIENT RELATIONSHIP TO INSURED Self | Spouse | Child | Other

7. INSURED'S ADDRESS (No., Street)

CITY | STATE

8. RESERVED FOR NUCC USE

CITY | STATE

ZIP CODE | TELEPHONE (Include Area Code)

ZIP CODE | TELEPHONE (Include Area Code)

9. OTHER INSURED'S NAME (Last Name, First Name, Middle Initial)

10. IS PATIENT'S CONDITION RELATED TO:

11. INSURED'S POLICY GROUP OR FECA NUMBER

a. OTHER INSURED'S POLICY OR GROUP NUMBER

a. EMPLOYMENT? (Current or Previous) YES NO

a. INSURED'S DATE OF BIRTH (MM DD YY) | SEX M F

b. RESERVED FOR NUCC USE

b. AUTO ACCIDENT? YES NO PLACE (State)

b. OTHER CLAIM ID (Designated by NUCC)

c. RESERVED FOR NUCC USE

c. OTHER ACCIDENT? YES NO

c. INSURANCE PLAN NAME OR PROGRAM NAME

d. INSURANCE PLAN NAME OR PROGRAM NAME

10d. CLAIM CODES (Designated by NUCC)

d. IS THERE ANOTHER HEALTH BENEFIT PLAN? YES NO If yes, complete items 9, 9a, and 9d.

READ BACK OF FORM BEFORE COMPLETING & SIGNING THIS FORM.

12. PATIENT'S OR AUTHORIZED PERSON'S SIGNATURE I authorize the release of any medical or other information necessary to process this claim. I also request payment of government benefits either to myself or to the party who accepts assignment below.

SIGNED | DATE

13. INSURED'S OR AUTHORIZED PERSON'S SIGNATURE I authorize payment of medical benefits to the undersigned physician or supplier for services described below.

SIGNED

14. DATE OF CURRENT ILLNESS, INJURY, or PREGNANCY (LMP) (MM DD YY) | QUAL.

15. OTHER DATE (MM DD YY) | QUAL.

16. DATES PATIENT UNABLE TO WORK IN CURRENT OCCUPATION (MM DD YY) FROM TO

17. NAME OF REFERRING PROVIDER OR OTHER SOURCE

17a.

17b. NPI

18. HOSPITALIZATION DATES RELATED TO CURRENT SERVICES (MM DD YY) FROM TO

19. ADDITIONAL CLAIM INFORMATION (Designated by NUCC)

20. OUTSIDE LAB? YES NO | $ CHARGES

21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY (Relate A-L to service line below (24E) ICD Ind.)

A. L B. L C. L D. L E. L F. L G. L H. L I. L J. L K. L L.

22. RESUBMISSION CODE | ORIGINAL REF. NO.

23. PRIOR AUTHORIZATION NUMBER

| 24. A DATE(S) OF SERVICE From (MM DD YY) | To (MM DD YY) | B. PLACE OF SERVICE | C. EMG | D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS | MODIFIER | E. DIAGNOSIS POINTER | F. $ CHARGES | G. DAYS OR UNITS | H. EPSDT Family Plan | I. ID. QUAL. | J. RENDERING PROVIDER ID. # |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | NPI | |
| | | | | | | | | | | NPI | |
| | | | | | | | | | | NPI | |
| | | | | | | | | | | NPI | |
| | | | | | | | | | | NPI | |
| | | | | | | | | | | NPI | |

25. FEDERAL TAX I.D. NUMBER SSN EIN

26. PATIENT'S ACCOUNT NO.

27. ACCEPT ASSIGNMENT? (For govt. claims, see back) YES NO

28. TOTAL CHARGE

29. AMOUNT PAID

30. Rsvd for NUCC Use

31. SIGNATURE OF PHYSICIAN OR SUPPLIER INCLUDING DEGREES OR CREDENTIALS (I certify that the statements on the reverse apply to this bill and are made a part thereof.)

32. SERVICE FACILITY LOCATION INFORMATION

33. BILLING PROVIDER INFO & PH #

SIGNED | DATE | a. | b.

NUCC Instruction Manual available at: www.nucc.org To reorder: www.FreeShopping.com/CMS1500formsStore.com CMS1500 APPROVED OMB-0938-1197 FORM 1500 (08-12)

PATIENT AND INSURED INFORMATION

PHYSICIAN OR SUPPLIER INFORMATION

# LETROZOLE
## (Advanced/Metastatic Treatment)

OTHER NAMES: Femara®

PURPOSE: Letrozole is a hormonal type medication which may be used for postmenopausal women to treat breast cancer. It works by decreasing the amount of estrogen in the body

ADMINISTRATION: Letrozole is taken by mouth in the form of tablets.
Take once a day at approximately the same time of day
Tablets may be taken with food or on an empty stomach

SIDE EFFECTS: Not all patients will experience all side effects.

| SIDE EFFECT | MANAGEMENT |
|---|---|
| Hot flushes: A sudden feeling of warmth which may be accompanied by sweating<br><br>(common but usually improves as your body adjusts to the medication) | • Dress in layers so you can remove clothing when you get warm.<br>• When possible, lower the room temperature.<br>• Try taking a cool shower or sipping ice water<br>• If feeling as if troublesome, speak to your doctor or nurse<br>• Medications may be helpful in managing continuing or bothersome symptoms. Discuss with your doctor. |
| Muscle, bone or joint pain<br><br>(common, may occur when you first start taking letrozole) | • You may take acetaminophen (Tylenol® and others) or other pain medications such as ASA (aspirin), ibuprofen or others if needed |
| Nausea<br><br>(may occur when you first start taking letrozole- usually mild to moderate) | • This rarely requires treatment and may resolve in a short time<br>• Take letrozole with a meal to lessen stomach upset.<br>• If vomiting occurs and lasts more than 24 hours, contact your doctor or nurse |
| Headaches: (not common) | • You may take acetaminophen (Tylenol® and others) or other pain medications such as ASA (aspirin), ibuprofen or others if needed<br>• Contact your nurse or doctor if headaches persist |
| Swelling/fluid retention —Hands and feet may swell and you may notice a gain in weight<br><br>(not common) | • Elevate your feet when sitting.<br>• Avoid tight clothing<br>• Report swelling or weight gain to your doctor. |

**CANCELLATION**

Friday, July 26, 2024

Fax To: Bhola Desai, RM Hotel & Suites
Fax: +1(480)-130-2229
Attn: Ajesh Patel
Subject: Cancellation Confirmation

| Cancellation Confirmation |
| --- |
| 36F8BF4F-3242-2B9 |
| Created: 07/26/2024 13:29:27 GMT |
| Per Annum: STAN BALUNT |

Dear Ajesh Patel,

Please be advised that the below reservation has been cancelled as per your request. If you have any questions or require additional assistance, please do not hesitate to contact Kalo Vacation Support Team at +1-844-562-2567 — we're always happy to help.

Thank you,
Kalo Vacation Support Team

| Reservation Details | | | |
| --- | --- | --- | --- |
| Booking Number | 1 | Number of Nights | 3 |
| Check-In | July 29, 2024 | Check-Out | July 30, 2024 |

| Guest Details | | | |
| --- | --- | --- | --- |
| First Name | Test | Last Name | Test |

Additional Guests

| Name | Age |
| --- | --- |
| Test | 30 |

Payment Details

| | |
| --- | --- |
| Room | July 29 |
| LCC | $0.00 |

Sub-Total: $0.00
Tax (50%): $0.00 Total: $0.00

Refund Taken Policy Date: Friday, July 26, 2024

Thanks for booking with us. We look forward to seeing you soon!

Un Ho+ Dog

Yet another source of uncertainty is both the data generation and the transmission processes. While moving a trajectory it is sometimes possible to see outliers suddenly locating the vessel [illegible] consecutive number 31435 (0x7a8b). This could be some malfunction of the vessel's system or [illegible] (Another should be taken for granted that corrupt data streams are going to be fed to the system

These sources of data uncertainty are more or less obvious. What is less obvious is another kind of uncertainty which origins from the behavior of the [illegible] objects. For example, an [illegible] is influenced by many factors, so predicting possible collisions by projecting in the future vessel trajectories and determining whether these future trajectories

Please visit our website at http://www.thetius.com for more information.

Thetius Corporation
Box 2793
Whitehorse, Yukon
Canada
Y1A 2C6

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**DO WE WANT TO KEEP ADDING PATTERNS TO A SYSTEM?**

Within the port context, this behavior should be considered [illegible] (time, etc.) should be changed so that a warning is produced only when there "really" is a danger given the port conditions. But imagine another scenario in which two vessels, away from any ports this time, are indeed on a "collision" course. But they have actually agreed beforehand to meet (e.g., for an inspection). Another case of a false projected collision is a res[illegible]on

SKU 233646

## Pattern Refinement

One solution to the problem of making behaviors satisfying a pattern might be simply to refine the patterns in order to capture all the possible cases. However there are two problems with this approach

Qty Description

First, such an ad nauseam pattern refinement might not even be feasible, since we might lack the necessary knowledge, especially at the early stages of system deployment.

04/07/2017 17:46

Second, the question remains whether we want to keep adding patterns to the system for every possible case, given the performance cost they might incur. Early detection of a behavior based on a possibly not confirmed pattern, could be preferable to a near perfect but delayed (and therefore possibly useless) one, especially for critical situations (this is the case of "better safe than sorry")

Please bring this summary up to your nearest Staples associate to pay for your services. Apply Rewards and Tax Exempt if applicable

Transaction Summary

CHRIS HALL
IS A
GOD IN
THINGS!

LA
CHUPACABRA!

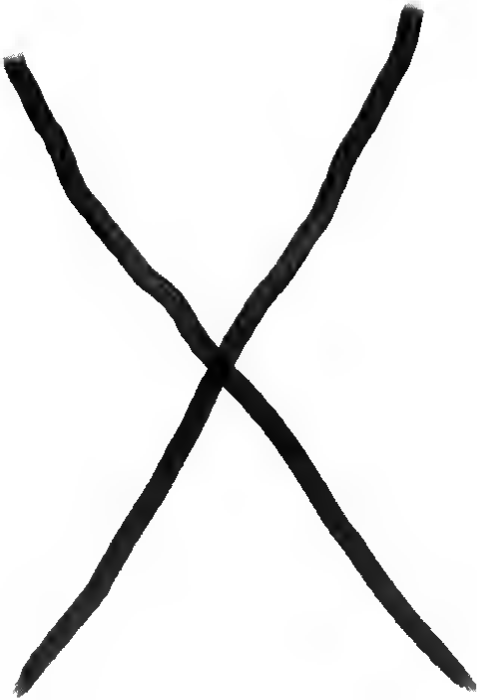
## INSTRUCTIONS FOR CASTING YOUR BALLOT BY MAIL

IF YOU PLAN TO ATTEND THE ANNUAL MEETING IN PERSON, YOU NEED NOT VOTE BY MAIL. BALLOTS WILL BE PROVIDED AT THE MEETING ON JANUARY 14, 2016

IF YOU WISH TO VOTE BY MAIL, PLEASE FOLLOW STEPS 1 AND 2 BELOW AND BE SURE TO AFFIX THE PROPER AMOUNT OF POSTAGE AND MAIL IT EARLY ENOUGH TO ARRIVE PRIOR TO THE ANNUAL MEETING.

1. AFTER MARKING YOUR SELECTIONS(S), PLACE THE GREEN AND PINK BALLOTS IN THE GREEN "BALLOT" ENVELOPE #1 AND SEAL THE [illegible] PRINTED ON THE BACK OF WHITE ENVELOPE #2.
2. AFTER STEP 1, PLACE THE GREEN ENVELOPE INTO THE WHITE ENVELOPE, SEAL THE ENVELOPE AND PLACE NECESSARY POSTAGE FOR MAILING.

Some Text



# BIOHAZARD

www.PrintableSigns.net

# 2017 Student Skills/Review Checklist

| Media service/skill | Date completed | | | | | | |
|---|---|---|---|---|---|---|---|
| **Review student camcorder (be able to demo to patron)** | | | | | | | |
| Power on camcorder | | | | | | | |
| Locate battery icon, record time | | | | | | | |
| Video 3 min on Camcorder 1 , 2 or 3 | | | | | | | |
| Playback on camcorder to check for audio/video | | | | | | | |
| Delete files | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| **Review student camcorder (be able to demo to patron)** | | | | | | | |
| Power on camcorder | | | | | | | |
| Locate battery icon, record time | | | | | | | |
| Video 3 min on Camcorder 5 or 6 | | | | | | | |
| Playback on camcorder to check for audio/video | | | | | | | |
| Delete files | | | | | | | |
| | | | | | | | |
| **Create iMovie project- use student camcorder to record 3-4min of footage (Complete directions next to Mac computers)** | | | | | | | |
| Import footage to Mac | | | | | | | |
| Edit out a few seconds | | | | | | | |
| Add one transit on | | | | | | | |
| Create title page | | | | | | | |
| Detach original audio | | | | | | | |
| Insert new audio track | | | | | | | |
| Record voice over | | | | | | | |
| Save project with your name and date in desktop folder titled media projects. | | | | | | | |

# MODIFICATION

Tuesday March 15, 2016

Fax To: **Bhalo Saar INN Hotel & Suite 1**
Fax: **+1(855)-220-1220**
Attn: **Ajeshand Patel**
Subject: Booking Confirmation

| Modify Reservation Confirmation |
|---|
| 37A8BB9E-3582 283 |
| Created: 03/15/2016 12:37:52 GMT |

Dear **Ajeshand Patel**

We have received the following reservation for your property and are transmitting this Reservation Confirmation via facsimile. If you have any questions regarding this transmission, please contact our Reservation Support Team at Tel +1 (408) 300-4687 or Email: **help@hirezlight.com**

Thank You,
Hirezlight.com

**Modification Details**

Modified Room Type from **1 King Bed** to **Queen Deluxe 1**

**GUEST INFO**

It is your obligation to safeguard this fax and keep this guests credit card information secure in accordance with your internal security procedures.

| | | | |
|---|---|---|---|
| Booked by: | **Mr Krishna Tester** | State: | **Alaska** |
| Address: | **Test** | Zip code: | **99102** |
| City: | **Adak** | Country: | **USA** |
| Email Address: | **test1881@aol.com** | Telephone Number: | **9789098888** |

**BILLING INFORMATION**

| | | | |
|---|---|---|---|
| Credit Card: | **Visa** | Expiry Date: | **03/2016** |
| Credit Number: | **xxxx yxxx-xxxx-1111** | Cvv Number: | **411** |
| | | **Grand Totals** | **74.28** |

**ROOM DETAILS**

| | | | |
|---|---|---|---|
| Number of Rooms: | **1** | Number of Nights: | **1** |
| Check In Date: | **March 31 2016** | Check Out Date: | **April 1, 2016** |

**Room 1: Queen Deluxe 1** — Number: 1 — Children: 0

| | | | |
|---|---|---|---|
| First Name: | **Mr Krishna** | Last Name: | **Tester** |
| Room Details | Date: | **Mar 31** | |
| | Rate: | **$52.00** | |

**Sub-Total: $52.00**
**Tax (14.00%): $7.28 + Fees ($15.00) = Total: $74.28**

Notes: Rates include Extra Person/Child Fees

**Special Request: testing**

**Thanks for selecting HiNeight.com as your partner**

This is a Test

Fax

Harbor
Hospital

## FOR YOUR INFORMATION

| | |
|---|---|
| To | **Test** |
| Fax number | 1 855-330-1239 |
| From | **KB** |
| Fax number | |
| Home phone | |
| Business phone | |
| Date & Time | 1/13/2016 5:12:42 AM |
| Pages sent | 1 |
| Re | Test |

This is a Test

CUMBERLAND PEDIATRICS
Karen A. Moore, M.D., F.A.A.P.
Alice E. Wilson, M.D., F.A.A.P.
Kevin D. Mason, M.D., F.A.A.P.
Tasheeka Williams, CPNP
Wendy Dyckson, CPNP

# CONFIDENTIAL - CONFIDENTIAL

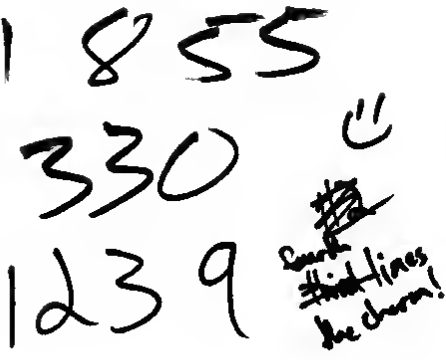
| | | | |
|---|---|---|---|
| **TO ATTN** | **TEST FAX SHEET** | **FAX:** | **1-855-330-1239** |
| **FROM:** | **Michael Hamilton** | **DATE** | **4/2/2016** |
| **RE:** | | **PAGES:** | |

☐ **Urgent** ☐ **For Review** ☐ **Please Reply**

☐ **Please Recycle**

**"CONFIDENTIAL"** The information contained in this FAX is confidential and may be legally privileged. It is intended for the use of the individual or entity named. If the reader is not the intended recipient, you are hereby notified that any use, distribution, or copy of this FAX is strictly prohibited.

If you have received this Fax in error please notify Cumberland Pediatrics **IMMEDIATELY at 770-951-5400.**


1855
330
1239
Lunch
Third time's
the charm!

TEST FAX

8-9-16

**Preparation for Holy Communion**

O Lord Jesus Christ King of everlasting glory, behold I desire to come to You this day and to receive Your Most Precious Body and Blood in this heavenly Sacramental for Your honor and glory and the good of my soul. I desire to receive You because it is your desire and You have so willed it: Blessed be your name forever! I desire to come to You like Mary Magdalene, that I may be delivered from all my evils and embrace You my only God. I desire to come to You, that I may be happily united to You, that I may henceforth abide in You and You in me; and that nothing in life or death may ever separate me from You. Amen.

**Prayer after Receiving Holy Communion**

Lord Jesus I love and adore You. You have come to me; I am one with You. I want You to remain with me forever, in this life and in the next. Thank you for allowing me to share Your divine life. May I become more like You through this sacred food. Let me never take You for granted, but always pray for those who are far from You in sin, ignorance and selfishness. Let me remember, in the words of St. Paul, that "there but for the grace of God, go I." Each day, I can become more like You, O lord. And each day I can pray for those

PURCHASE ORDER NUMBER : 8721601010

20 PAGE NUMBER : 1

Supplier #: 71151010
MAKITA

PO BOX:
BUFORD GA 30518

Phone : (888) 862 2444 EXT 1
Fax : (855) 110 1110

STORE 8721
THE HOME DEPOT
ATTENTION: TOOL RENTAL CENTER
8580 MACLEOD TRAIL SW
CALGARY AB T2H 0K6
CANADA

Phone : (778) 861-8430 EXT 12
Fax : (403) 258 1000

PO Creator: Tool Rental Programmer
Phone:

PO Contact: See above
Phone:

Bill To:
Tool Rental Payables
P.O. Box 105744

Atlanta GA 30348 5744

| ORDER DATE | PAYMENT TERMS | F.O.B | SHIP TO ARRIVE BETWEEN | |
|---|---|---|---|---|
| 11/14/2017 | 1% Net 60 | per SBA | 11/21/2017 | 11/28/2017 |

| Qty. Ord. | Part Number / Description | Model | Price | Amount |
|---|---|---|---|---|
| 5 | DCS8421Z0Q<br>Chainsaw 20" (Gas) | DCS8421Z0Q(SPA) | 430.00 | 2150.00 |
| 6 | 111075-1<br>25-20 HEX BOLT/CAP SCREW | | 4.21 | 20.85 |

ORDER TOTAL 2170.85

Comments:

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(505) 445-1055

**************************

*** ACTIVITY REPORT ***

**************************

| ST. TIME | DESTINATION NUMBER | DESTINATION ID | NO | MODE | | PGS. | RESULT |
|---|---|---|---|---|---|---|---|
| 01/08 18:13 | 18884732963 | | 0002 | TRANSMIT | COL | 0 | NG 00'43 0 |
| 01/08 19:15 | 18553922666 | | 0001 | TRANSMIT | | 0 | NG 00'00 0 STOP |
| 01/08 19:20 | | | 5001 | AUTO RX | ECM | 2 | NO 02'23 2 |
| 01/08 19:22 | | | 5002 | AUTO RX | ECM | 0 | NG 01'05 0 |
| 01/08 19:27 | 18553922666 | | 0003 | TRANSMIT | | 0 | NG 00'00 0 STOP |
| 01/08 19:31 | 18553301239 | | 0004 | TRANSMIT | ECM | 1 | NO 00'45 1 |
| 01/08 19:40 | 18553301239 | | 0005 | TRANSMIT | G3 | 1 | OK 00'42 |
| 01/08 19:55 | | | 5001 | AUTO RX | | 2 | NG 00'00 0 #995 |
| 01/08 19:12 | | | 5003 | AUTO RX | G3 | 2 | OK 07'25 |
| 01/08 19:21 | | | 5003 | AUTO RX | | 2 | NG 00'00 0 #995 |
| 01/08 19:22 | 0000000000 | | 5004 | AUTO RX | G3 | 1 | OK 01'14 |
| 01/08 19:25 | | | 5004 | AUTO RX | | 1 | NG 00'00 0 #995 |
| 01/08 19:44 | | | 5005 | AUTO RX | G3 | 0 | NG 00'46 0 #005 |
| 01/08 21:16 | 18884732963 | | 0006 | TRANSMIT | | 0 | NG 00'43 0 |
| 01/08 21:21 | 9055713690 | | 0007 | TRANSMIT | ECM | 1 | OK 00'15 |
| 01/09 12:52 | | | 5006 | AUTO RX | G3 | 0 | NG 00'48 0 #005 |
| 01/09 13:09 | 12132942943 | | 0008 | TRANSMIT | | 0 | NG 00'35 0 #018 |
| 01/09 13:11 | 18553301239 | | 0009 | TRANSMIT | G3 | 2 | OK 00'50 |
| 01/10 21:47 | 18553301239 | | 0010 | TRANSMIT | G3 | 1 | OK 00'38 |
| 01/11 12:55 | | | 5007 | AUTO RX | G3 | 0 | NG 00'46 0 #005 |

Test fax from Circuit iD

WF-2630

EPSON
EXCEED YOUR VISION

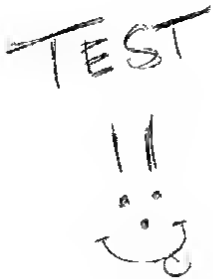
# Fax Diagnostic Report

Name
Fax

Check Items

| | |
|---|---|
| 1 Product Hardware Check | PASS |
| 2 Phone Cable Connection Check | PASS |
| 3 Connection Port Check | PASS |
| 4 Phone Line Connection Quality Check | PASS |
| 5 Dial Tone Detection | PASS |

Result
The fax connection is OK



Is your fax machine working? I find that hard to believe.

3055918292

| Date/Time | Calling Number | Destination Number | Calling Area | Duration | Rate | | Price | |
|---|---|---|---|---|---|---|---|---|
| 7/2/12 12:53 | 18546585644 | Inbound | Domestic | 20 | $ | | $ | |
| 7/2/12 13:37 | Outbound | 18546585644 | Domestic | 13 | $ | | $ | |
| 7/2/12 13:41 | 13054692857 | Inbound | Domestic | 3 | $ | | $ | |
| 7/2/12 13:41 | Outbound | 15613004610 | Domestic | 1 | $ | | $ | |
| 7/2/12 13:41 | 19548640136 | Inbound | Domestic | 7 | $ | | $ | |
| 7/2/12 17:45 | Outbound | 011349245011113 | Spain | 77 | $ | 0.99 | $ | 76.23 |

Add totals Charges For 3055918292 Total $ 76.23

WF-3640

EPSON
EXCEED YOUR VISION

# Fax Diagnostic Report

PAGE 001/001
Feb 05.2015 07:36 PM

Name

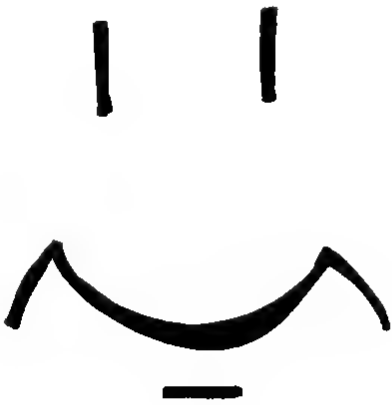
Fax

Check Items

| | | |
|---|---|---|
| 1 | Product Hardware Check | OK |
| 2 | Phone Cable Connection Check | OK |
| 3 | Connection Port Check | OK |
| 4 | Phone Line Connection Quality Check | OK |
| 5 | Dial Tone Detection | OK |

Status 1

The fax connection is OK



001 510 545 0990

anemometer

X Epoxy Shaft collar to Washer
X Drill hole in cap
X Cut mouse housing
X Shave bearing diameter
X Cut axel housing pvc
X Cut axel to length
X cut cross cap of axel for prop member
X drill holes in rotor

Comments

confidential

# fax

| | |
|---|---|
| *To* | **1-888-877-1655** |
| *Fax Number* | 1 888 8771655 |
| *From* | |
| *Fax Number* | |
| *Business Phone* | |
| *Home Phone* | |
| *Pages* | 1 |
| *Date/Time* | 1/17/2013 4:18:47 PM |
| *Subject* | test fax |

thanks

TRANSMISSION VERIFICATION REPORT

TIME 01/01/2011 17:18
NAME
FAX
TEL
SER # U627H8C9NE4935P

| | |
|---|---|
| DATE,TIME | 01/01 12:56 |
| FAX NO /NAME | 18887216555 |
| DURATION | 00 00 26 |
| PAGE(S) | 01 |
| RESULT | OK |
| MODE | STANDARD ECM |

**DUMMY FAX DOCUMENT**

**NO CONTENT HERE**

# Using the Screen Burn Protection and Energy Saving Functions

## Preventing screen burn

(MENU/123) > MENU > System > Auto Protection Time (Try Now)

You can use the Screen Burn Protection function to protect the screen. Still images can leave burned-in after-images if left on the screen for a long period of time. Select a time setting from the list. If a still image is shown on the screen for longer than the time that you selected, the TV automatically activates the Screen Burn Protection function.

## Reducing the energy consumption of the TV

(MENU/123) > MENU > System > Eco Solution (Try Now)

You can adjust the brightness level of the TV and prevent overheating to reduce overall power consumption.

- **Energy Saving** (Try Now)

  Allows you to select a brightness setting from the list to reduce the TV's power consumption.

- **Eco Sensor** (Try Now)

  Automatically adjusts the brightness level of the TV according to the ambient light level to reduce power consumption. If the Eco Sensor has adjusted the screen's brightness level, you can select **Min. Backlight** or **Min. Cell Light** (in applicable models) to manually adjust the minimum screen brightness.

- **No Signal Power Off** (Try Now)

  Allows you to select a length of time from the list. If no signal has been received for the length of time you selected, the TV automatically cuts off the power to reduce power consumption.

- **Auto Power Off** (Try Now)

  Automatically turns off the TV to prevent overheating when the TV remains on for the specified period of time without any user input.

- **Motion Lighting**

  Adjusts the brightness in response to on-screen movements to reduce power consumption.

  This feature is only available when the **Picture Mode** is set to **Standard** and is not available in 3D mode.

  This function is deactivated when you adjust a picture quality setting, such as **Contrast** and **Brightness**.

Test
Test

This is a test fax sent by GFI FAXmaker.

# TEST

This is a test fax sent by GFI FAXmaker.

Testing 1 2 3

**Room 2: Deluxe Standard Double** — Adults: 2 Children: 1

| First Name | Test | Last Name | Test |
|---|---|---|---|

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Room Details | Date: | May 13 | May 14 | May 15 | May 16 | May 17 | May 18 | May 19 |
| | Rate: | $ 110.00 | $ 110.00 | $ 110.00 | $ 110.00 | $ 110.00 | $ 110.00 | $ 110.00 |
| | Date: | May 20 | May 21 | May 22 | May 23 | May 24 | May 25 | May 26 |
| | Rate: | $ 110.00 | $ 110.00 | $ 110.00 | $ 110.00 | $ 110.00 | $ 110.00 | $ 110.00 |
| | Date: | May 27 | May 28 | May 29 | May 30 | | | |
| | Rate: | $ 110.00 | $ 110.00 | $ 110.00 | $ 110.00 | | | |

**Sub-Total:** $1,980.00
**Tax 10.00%:** $198.00 + **Fees($61.67)= Total** $ 2,239.67 **Note** Rates Include Extra Person/Child Fees

**Room 3: Queen** — Adults: 2 Children: 1

| First Name | Test | Last Name | Test |
|---|---|---|---|

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Room Details | Date: | May 13 | May 14 | May 15 | May 16 | May 17 | May 18 | May 19 |
| | Rate: | $ 115.00 | $ 115.00 | $ 115.00 | $ 115.00 | $ 115.00 | $ 115.00 | $ 115.00 |
| | Date: | May 20 | May 21 | May 22 | May 23 | May 24 | May 25 | May 26 |
| | Rate: | $ 115.00 | $ 115.00 | $ 115.00 | $ 115.00 | $ 115.00 | $ 115.00 | $ 115.00 |
| | Date: | May 27 | May 28 | May 29 | May 30 | | | |
| | Rate: | $ 115.00 | $ 115.00 | $ 115.00 | $ 115.00 | | | |

**Sub-Total:** $2,070.00
**Tax 10.00%:** $207.00 + **Fees($60.67)= Total** $ 2,338.67 **Note** Rates Include Extra Person/Child Fees

**Cancellation Policy:**
We have a 72 Hour Cancellation Policy. If you wish to cancel, you must do so by 3 PM 72 hours or 3 days prior to your arrival date. If you cancel past the expiration of the Cancellation Period or you fail to show up, a no-show charge will be levied on your credit card for one full night plus taxes and fees. We really need to test hell out of it. We like this.

Thanks for selecting JNSight.com as your partner!

TEST

# USER SETTINGS LIST

TIME 01/01/2007 00:53
NAME
FAX
SER # BROC7F759815

| | |
|---|---|
| MODE TIMER | 2 MINS |
| PAPER TYPE | PLAIN PAPER |
| PAPER SIZE | LETTER |
| RING VOLUME | MEDIUM |
| BEEPER | LOW |
| SPEAKER VOLUME | LOW |
| AUTO DAYLIGHT | OFF |
| ON/OFF SETTING | OFF |
| LCD CONTRAST | MEDIUM |
| BACKLIGHT | LIGHT |
| DIM TIMER | 30 SECS |
| OFF TIMER | OFF |

| | |
|---|---|
| RING DELAY | 04 RING(S) |
| F/T RING TIME | 20 SEC |
| EASY RECEIVE | ON |
| FAX REMOTE CODE | ON *51 #51 |
| AUTO REDUCTION | ON |

| | |
|---|---|
| FAX RESOLUTION | STANDARD |
| BATCH TRANSMISSION | OFF |
| REAL TIME TX | OFF |
| SCAN SIZE | LETTER |

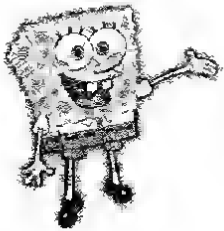
| | |
|---|---|
| TRANSMISSION VERIFICATION REPORT | OFF |
| JOURNAL PERIOD | EVERY 50 FAXES |
| START TIME | 00:00 |

| | |
|---|---|
| FWD/PAGE/STORE | OFF |
| FAX FORWARD NUMBER | |
| PAGING NUMBER | |
| PIN NUMBER | |
| REMOTE ACCESS | *#51 |

| | |
|---|---|
| COMPATIBILITY | NORMAL |
| DISTINCTIVE RING | OFF |
| AREA CODE | 000 |

| | |
|---|---|
| RECEIVE MODE | FAX ONLY |
| DATE/TIME | |
| DATE | 01/01/2007 |
| TIME | 00:53 |
| TONE/PULSE | TONE |
| DIAL TONE | NO DETECTION |

| | |
|---|---|
| TOTAL | 000398 |
| COLOR COPY | 000002 |
| MONO COPY | 000135 |
| PRINT | 000229 |
| MEDIA PRINT | 000000 |
| FAX/LIST | 000030 |



No one human being is capable of achieving flawless mental and physical health as well as a picture-perfect lifestyle, therefore health is scaled according to a variety of factors. Age race background, environment, culture and religion are all related to a person's health status. What is considered healthy versus unhealthy is widely based on personal opinion and judgment instead of understanding and knowledge Alcoholism, for example, is viewed by some cultures as a disease (often hereditary), that requires intense treatment and years of recovery to be rid of. Others would argue that alcoholism is not a disease, but rather an issue brought on by poor choices perpetuated by a weak will

Regardless of the prognosis of a disease or the choices one makes, good health is a realistic goal for those who strive for it. In comparison to the rest of the world, Canadians have an advantage in regards to acquiring and maintaining optimal health. Affordable, accessible healthcare that is based on a high standard and provided by well-educated professionals, is a luxury that is too often taken for granted. Opinions of what health means are widespread, though most would agree that doing what is possible to feel the best we can is crucial If health is any one thing it is the key to a prosperous life. Without health life is shorter, less enjoyable, and has less meaning.

2. What are some of the determinants of health? Which ones do you think are most important, and why?

Some of the determinants of health are as follows quality of health care, social / societal ranking, race, locale, age economic status, education, personal development, lifestyle, health practices, and responsibility, biology, psychology (mental state /

04/10/2012 10:33

**Subject**

**Sender**

| | |
|---|---|
| *Name* | John Johnson |
| *Company* | Is Technology Group Inc |
| *Location* | Joplin |
| *Fax number* | 417 206 6403 |
| *Telephone* | |
| *E-Mail* | johnj@istechgroup.com |

**Recipient**

| | |
|---|---|
| *Name* | |
| *Company* | |
| *Location* | |
| *Fax number* | 800-200-1300 |
| *Telephone* | |

*Number of pages following this page 0*

*Comments*

# FAX OUT TEST 3

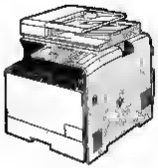
TEST

to

213-294-2943

Canon

# Color imageCLASS MF8380Cdw



## Starter Guide

English

Read this guide first
Please read this guide before operating this product
After you finish reading this guide, store it in a safe place for future reference.

## Guide de démarrage

Français

Veuillez d'abord lire ce guide
Lisez ce guide avant d'utiliser ce produit.
Après avoir pris connaissance de son contenu, conservez-le dans un endroit sûr pour pouvoir le consulter en cas de besoin

## Guía de inicio

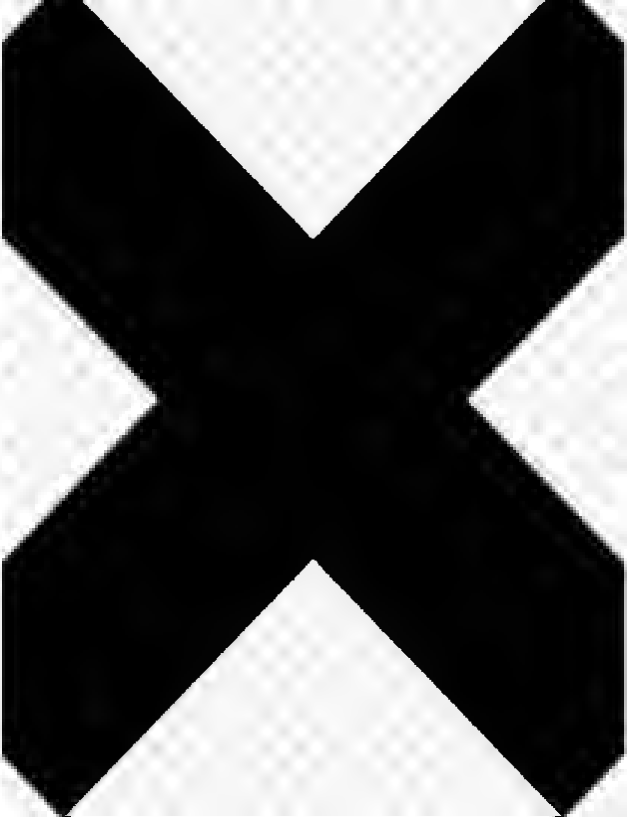
Español

Lea esta guía primero
Por favor, lea esta guía antes de usar este producto.
Después de leer esta guía, guárdela en un lugar seguro para posteriores consultas.

## Manual do iniciante

Português

Leia este manual primeiro
Leia este manual antes de utilizar o produto
Após ler este manual, guarde-o em um local seguro para consultas futuras.



1855330
1239

```
Test1: [redacted]
```

| Name | Email | City | Country |
|---|---|---|---|
| ahmed halaby | fx@ns-arabia.com | Alexandria | Egypt |
| wwt | wwt@hfd.com | Florida | us |
| ahmmed halaby | fax@ns-arabia.com | alex | Egypt |
| ahmed halaby | fx@ns-arabia.com | DC | US |
| Lara Wilson | ff@wagelts.com | FL | US |

This is Custom water Mark

To: Faxtoy.net

From: Central

1-855-330-1239

1-213-294-2943

# Test Fax

Fill in the values below and click Print Test Fax Page

| | |
|---|---|
| To | From |
| Fax | Fax |
| Phone | Phone |
| Subject: Test Fax | Date |

## Fax Settings

| | |
|---|---|
| Error correction mode | Off |
| Baud Rate | 9600 |
| Resolution | Fine (Use if sending graphics or photos) |
| Send logo | Print Logo |
| Answer Mode | Fax Only |
| Ring to Answer | Zero (0) |
| Scaling | Full |
| Power Save | 5 Minutes |
| Distinctive Ring | OFF |

## Troubleshooting Steps

If you are having problems receiving or sending faxes, try the following steps:

- Power off the unit and then power it back on. Wait for the unit to initialize and then attempt to send a test fax.
- Try using a new phone cord that is known to work and that is long enough to reach the unit.
- Check the wall phone jack by plugging a working phone into it.
- Connect the unit directly to the wall phone jack, bypassing any phone wiring.
- Remove any telephone splitters that may be connected between the unit and the wall phone jack.

## Further Assistance

If you need further assistance, please visit Vonage's Fax Support Center at the following web address: http://

To download the latest version of this document, please visit **www.vonage.com**

***

**HP Officejet 6100 Series 6110xi**
**Personal Printer/Fax/Copier/Scanner**

Log for
ronald cutler
801-418-1429
Apr 06 2009 8:23am

**Last Transaction**

| Date | Time | Type | Identification | Duration | Pages | Result |
|---|---|---|---|---|---|---|
| Apr 6 | 8:22am | Fax Sent | 8012500671 | 0:32 | 0 | Error 358* |

* A communication error occurred during the fax transmission. If you're sending, try again and/or call to make sure the recipient's fax machine is ready to receive faxes. If you're receiving, contact the scanner and ask them to send the document again.

TEST

TEST

## MODIFICATION

Thursday November 08, 2018

| Modify Reservation | Confirmation |
|---|---|
| 47268211-122 295 | |
| Received:11/08/2018 3:07:31 GMT | |

To: Mr. Ajesh Chandran

We have received the following reservation request. Please review the information below carefully and let us know if any changes are required. Please note that this is not a confirmed reservation.

Thank You
INNSIGHT.com

### Reservation Status

Pending Request - Date Sent: February 21, 2015 at 3:29:5

### Guest Information

Please review the following information carefully and make any necessary changes before clicking the confirm button.

| | | | |
|---|---|---|---|
| First Name | Pradeep Ramshekar | City | Maharashtra |
| Address | Kg Nagar Pune | Zip Code | 411041 |
| City | Pune | Country | INDIA |
| Email Address | pradeepramshekar77@gmail.com | Daytime Phone Number | 9823117077 |

### Reservation Information

| | | | |
|---|---|---|---|
| Card Type | Visa | Expiration | 09/2019 |
| Card Number | 4111111111111111 | Grand Total | $10,795.68 |

### Reservation Details

| | | | |
|---|---|---|---|
| Number of Rooms | 1 | Number of Nights | 14 |
| Check In | 02 February 5 2019 | Check Out Date | February 22 2019 |

### Room Details

| First Name | Pradeep | Last Name | Ramshekar |
|---|---|---|---|

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| Date | Feb 3 | Feb 4 | Feb 5 | Feb 6 | Feb 7 | Feb 8 | Feb 9 |
| Rate | $404.00 | $404.00 | $404.00 | $404.00 | $404.00 | $404.00 | $404.00 |
| Date | Feb 10 | Feb 11 | Feb 12 | Feb 13 | Feb 14 | Feb 15 | Feb 16 |
| Rate | $404.00 | $404.00 | $404.00 | $404.00 | $404.00 | $404.00 | $404.00 |
| Date | Feb 17 | Feb 18 | Feb 19 | Feb 20 | Feb 21 | Feb 22 | Feb 23 |
| Rate | $404.00 | $404.00 | $404.00 | $404.00 | $404.00 | $404.00 | $404.00 |
| Date | Feb 24 | Feb 25 | Feb 26 | | | | |
| Rate | $404.00 | $404.00 | $404.00 | | | | |

Sub-Total: $9 096.00
Tax (12.00%): $1089.60 + Fees $610.08 = Total $10 795.68

Rates Subject to Local State Room/Use Taxes

Special Request: Bar and Wine copy by mail

Thank You for your business. Please do not reply to this e-mail.

TEST!

1213 294 2943

Reading List

FAX
SER. # : UE2099N1F320100

| NO. | DATE | TIME | FAX NO. /NAME | DURATION | PAGE(S) | RESULT | COMMENT |
|---|---|---|---|---|---|---|---|
| | | | | | | | |

BUSY: BUSY/NO RESPONSE
NG : POOR LINE CONDITION / OUT OF MEMORY
PC : PC-FAX
NOT TX: SPEED DIAL CHANGED

* : TX/RX FAX NOT AVAILABLE

| | |
|---|---|
| DATE TIME | 01/19 05:57PM |
| FAX NO./NAME | 18553301203 |
| DURATION | 3E1:03:03 |
| PAGE(S) | 01 |
| RESULT | OK ** |
| MODE(S) | PHOTO |
| REMOTE | (J)A |
| MINE | |

TRANSMISSION VERIFICATION REPORT

TIME : 01/19/2014 05:59PM
NAME :
FAX :
SER. # : UE2099N1F320100

http://faxtoy.net/thumbs/fax-BcK49J.jpg 9/10/2014

Print Coupon

Same day appointments available

Convenient evening and weekend hours

We service all makes and models

ASE certified technicians

Thursday, February 12, 2015

| Reservation Confirmation |
| --- |
| [redacted] |
| [redacted] |

Dear [redacted],

| [redacted] | | | |
| --- | --- | --- | --- |
| [redacted] | [redacted] | [redacted] | [redacted] |
| [redacted] | [redacted] | [redacted] | [redacted] |
| [redacted] | [redacted] | [redacted] | [redacted] |

| [redacted] | | | |
| --- | --- | --- | --- |
| [redacted] | [redacted] | [redacted] | [redacted] |
| [redacted] | [redacted] | [redacted] | [redacted] |

| [redacted] | | | |
| --- | --- | --- | --- |
| [redacted] | [redacted] | [redacted] | [redacted] |
| [redacted] | [redacted] | [redacted] | [redacted] |

| [redacted] | | | |
| --- | --- | --- | --- |
| [redacted] | [redacted] | [redacted] | [redacted] |
| [redacted] | [redacted] | [redacted] | [redacted] |

| [redacted] | | | |
| --- | --- | --- | --- |
| [redacted] | [redacted] | [redacted] | [redacted] |
| [redacted] | [redacted] | [redacted] | [redacted] |

| [redacted] | | | |
| --- | --- | --- | --- |
| [redacted] | [redacted] | [redacted] | [redacted] |
| [redacted] | [redacted] | [redacted] | [redacted] |

| [redacted] | | | |
| --- | --- | --- | --- |
| [redacted] | [redacted] | [redacted] | [redacted] |
| [redacted] | [redacted] | [redacted] | [redacted] |

Special Requests notes

+1 for Boaty McBoatface!

This is a test

The World is

Ending T.38

FAX IS WORKING!!

8!

# Windows Printer Test Page

You have correctly installed your Brother MFC-L2740DW series on BOYNTON

## PRINTER PROPERTIES

| | |
|---|---|
| Submitted Time: | 3:36:09 PM |
| Date: | 3/30/2016 |
| User Name: | [redacted] |
| Computer Name: | [redacted] |
| Printer Name: | Brother MFC-L2740DW series |
| Printer Model: | Brother MFC-L2740DW series |
| Color Support: | No |
| Port Name(s): | USB001 |
| Data Format: | RAW |
| Printer Share Name: | |
| Printer Location: | |
| Print Processor: | winprint |
| Comment: | MFC-L2740DW series |
| Separator Page: | |
| Location: | |
| OS Environment: | Windows x64 |

## PRINT DRIVER PROPERTIES

| | |
|---|---|
| Driver Name: | Brother MFC-L2740DW series |
| Driver Type: | Type 3 - User Mode |
| Driver Version: | 1.8.0.0 |

## ADDITIONAL PRINT DRIVER FILES

C:\windows\system32\spool\DRIVERS\x64\3\BREML2740PW.DAT
C:\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_en-US.DLL
C:\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_en-GB.DLL
C:\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_fr-CA.DLL
C:\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_fr_FR.DLL
C:\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_de-DE.DLL
C:\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_it_IT.DLL
C:\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_es-ES.DLL
C:\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_pt_PT.DLL
C:\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_pt_BR.DLL
C:\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_nl_NL.DLL
C:\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_nn_NO.DLL
C:\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_sv_SE.DLL
C:\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_da_DK.DLL
C:\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_fi_FI.DLL
C:\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_id_ID.DLL
C:\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_ru_RU.DLL
C:\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_bg_BG.DLL
C:\windows\system32\spool\DRIVERS\x64\3\BRLGM13A_uk_UA.DLL

TRUE TRAVEL

**Invoice # [illegible]**

**Travelers:**

## Cost Tr[illegible]

| DESCRIPTION | SUBTOTAL |
|---|---|
| Trip | $0.00 |
| [illegible] Pay [illegible] | $0.00 |
| Refunds | $0.00 |
| **Total Due** | **$0.00** |

| Date | Cardholder | Card Number | Vendor | Amount | Comment |
|---|---|---|---|---|---|

**Thank you for arranging your travel with Jesse Dixon.** Please take a moment to thoroughly review your invoice and, upon acceptance, digitally sign this invoice using the link provided below. You will be the only recipient of this invoice and you are solely responsible to convey all information to the listed travelers. Review this document to ensure all information is accurate, including all details of your trip are correct, including travel dates and package inclusions. This document replaces any verbal discussion or other communication regarding quotes, emails or prior invoices.

Powered by FAX from the edge...

[redacted]

Counter

| | |
|---|---|
| Serial No | W914PC05755 |
| Date of Today | Mar 05,2015 08:50 AM |

| | |
|---|---|
| Total | 0 |

Please FAX to 805 239-3343

# FAX TEST

XYZ.pdf

Kapanga
THE MEDIA OVER IP SOFTPHONE

Voice, Fax & Video One Softphone

# KAPANGA TEST PAGE

# 11111111111111111

HELLO HALLO HELLO HELLO HELLO HELLO HELLO HELLO HELLO HELLO HELLO HALLO HELLO HELLO HALLO HOLA HOLA HOLA HOLA HOLA HOLA HOLA HOLA HOLA HOLA HOLA HOLA HOLA HOLA HOLA HOLA HOLA

HALLO HALLO HALLO HALLO HALLO HALLO HALLO HALLO HALLO HALLO HALLO HALLO HALLO HALLO HALLO HALLO

ZDRAVSTVUITE ZDRAVSTVUITE ZDRAVSTVUITE

TEST EPSON FAX MACHINE

kczwdfc2 mmvTestTextFiletxt txt

test text file

**Recipient Information**

**To:** Grand Crowne
**Company** Springfield
**Fax #** 2132842943

faxZERO.com
send a fax for free

**Sender Information**

**From** John
**Company** IS
**Email address** john.johnson@stechgroup.com (from 109.235.51.110)
**Phone #** 4172065400
**Sent on** Friday, January 16 2015 at 3:13 PM EST

This is a test fax

Test

test

test

test

test template

faxZERO.com has a zero tolerance policy for abuse and junk faxes. If in fact you received this fax in error or you do not wish to receive faxes from faxZERO.com in the future, please click on the following link: http://www.faxzero.com/optout.html and your fax number will be removed from our database. We sincerely apologize for the inconvenience.

I
LOVE
Faxes!

## Basic mobile device management (MDM)

Have devices enrolled in your MobileIron Cloud system means you are able to complete basic management tasks including

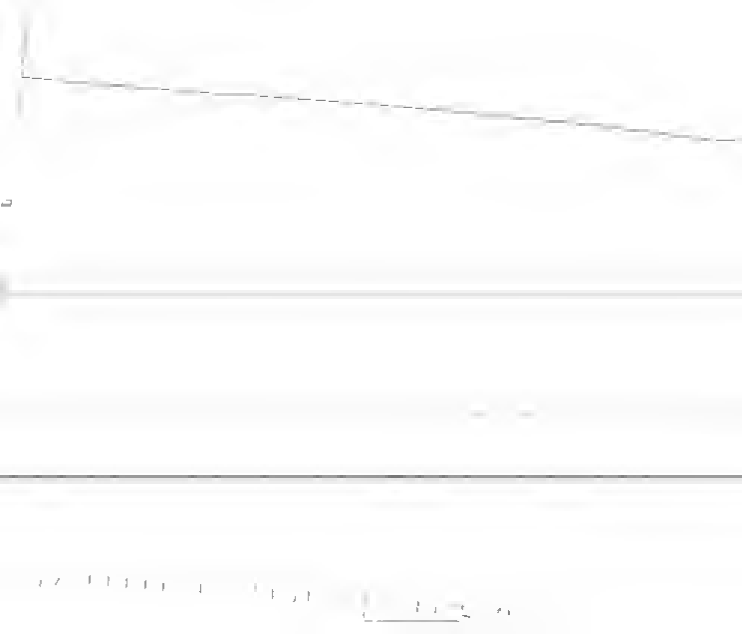
- send a message to a device
- remove sensitive data from a stolen device
- lock a device until you determine whether it is accounted for

**What to do:** Select the device and the task to perform

**Where to go.** Go to **Devices > Devices** and click **Actions**.

## For advanced features

When you are ready to try more advanced features, see Advanced Setup



FAX FAX FAX FAX FAX FAX FAX FAX FAX FAX FAX FAX FAX

Wednesday July 24, 2013

| Reservation Confirmation |
| --- |
| [illegible] |
| Confirmation # 0924029133 12h43 GMT |

Dear Given Name,

We have received an Alamo reservation for the property and are pleased that the reservation is confirmed. Please review the reservation details below and contact us if you have any questions regarding your reservation. Please mention your reservation number when you call.

Thank You
Reservations

## Rental Information

| Booked by | Given Name | Status | Confirmed |
| --- | --- | --- | --- |
| Arrival | Wed 7/24/2013 | Departure | Wed 7/31/2013 |
| Date | Status | Location | Phone |
| Pick-up | Alamo Rent A Car at Orlando International Airport | Orlando, FL | 407-856-5656 |

## Vehicle Information

| Car Class | Intermediate | Estimated Total | $ 0.00 |
| --- | --- | --- | --- |
| Total Mileage | Unlimited (0.00 miles) | Unit Charge | Daily |

## Rental Rate Information

| Number of Days | 1 | Number of Weeks | |
| --- | --- | --- | --- |
| Check Out Date | Wed 7/24/2013 | Check In Date | Thu 7/25/2013 |

## Renter Information

| First Name | Given | Middle Name | Name |
| --- | --- | --- | --- |
| Driver License | Number | Exp. Date | |
| | State | Country | USA |

Sub-Total $ 0.00
Tax (10.00%) $ 0.00 + Fees($3.00) = Total: $ 3.00

Some taxes and fees may not be reported with this rate

Special Requests

-FAX TEST

11

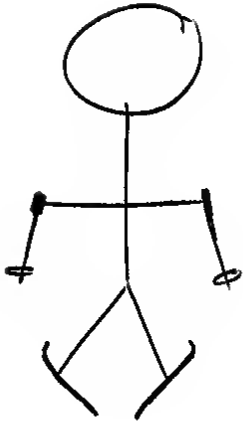
**To test the send functionality of your fax machine,** send a one-page fax to 1-855-330-1239 (a toll-free number in the United States.) When it's finished transmitting, point your web browser to Fax Toy -- it's a fun web site that displays whatever is faxed to that number. Within a minute your fax should appear on the site. Click the thumbnail to see a large version.

**To test the receive functionality of your fax machine,** point your web browser to FaxZero. this site lets you send faxes for free to anywhere in the United States and Canada. Within a few minutes your fax machine should ring — hopefully, it will automatically answer and spit out the test fax.

Try Fax.com Free

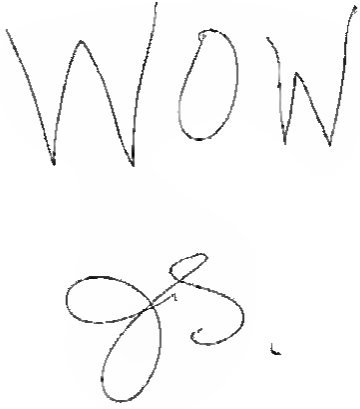
Get an internet fax number that sends and receives faxes online.

This is a
test



| | |
|---|---|
| To: | [illegible] |
| Fax number: | 1 866 330 2 30 |
| From | Ernest Cox |
| Fax number: | |
| Business phone | |
| Home phone | |
| Date & Time | 3/14/2016 6:06:22 PM |
| Pages: | 1 |
| Re | test |

this was a test fax from can co663


WOW
JS.

$$\frac{1}{x+4} + \frac{2}{5}$$

TurboTax® Intuit
It's your money. Keep more of it – and file taxes for FREE
Refinance ...ow

# America's Understanding of Emancipation Proclamation On Its 150th Anniversary Too Simple For Country's Own Good

Posted: 01/01/2013 4:36 pm EST | Updated: 01/08/2013 4:02 pm EST

Abraham Lincoln, the last president with the stovepipe hat the full beard and the grief-stricken eyes, slipped away from the White House's annual New Year's celebration with a few members of his administration. Lincoln steadied his nerves. Then his hands.

After a few minutes he took a pen, signed the Emancipation Proclamation and ushered in the beginning of the end of him and a half centuries of American chattel slavery, some of its attendant violence and human degradation. Exactly 150 years ago today, the Emancipation Proclamation — a monumental document written on both sides of an ordinary sheet of White House paper — declared slaves living in most of the South forever free.

For many American adults it's also the moment when universal legal freedom became a reality for an estimated 4 million black slaves. But scholars who have studied the document, Lincoln and Civil War history say this limited understanding of how slaves became free citizens led to a national habit of thinking about countless issues like race and equality simply. We finite challenges already wrestled with and resolved.

'Of all the country's foundational and key documents the Emancipation Proclamation may well be the most misunderstood,' said Eric Foner, a Columbia University historian and a leading Reconstruction, race and Lincoln scholars.

'On the one hand there are a healthy share of Americans who believe that Lincoln freed all the slaves with a stroke of his pen,' said Foner, who this year published 'The Fiery Trial: Abraham Lincoln and American Slavery.'

On the other, there is this cynical modern take that says Lincoln wasn't interested in emancipation, that his bold action for purely political reasons, for military reasons and this no-big-deal that many slaves were actually freed. None of that is entirely true.

Lincoln was not the lone force behind emancipation but rather an essential part of a coalition of outspoken borderstate that included free blacks and whites, said Lonnie G. Bunch III, director of the Smithsonian's National Museum of African American History and Culture and one of the curators of the Smithsonian's 150th Emancipation Proclamation anniversary exhibit.

Sponsored Links
Save a life. Run. Learn 5K
Sign up. Learn guidelines. Save heart! Join now
Inspired Runners
Recently Viewed
30-second trick for a flat belly
The daily 30-second trick BOOSTS your body's #1 fat-burning hormone
Fat Burning Secret
Join Best 5 Exercise Poll
"#1 Your prolonged" says NYC MD. Here is a natural way to fix it now!
Sponsored Links

Lincoln also was responding to the unique pressure slaves brought to bear said Bunch.

From the very start of the war in South Carolina, slaves began running away more frequently and willingly living in a state of legal limbo. When slaves with less ties to Virginia given refuge in a Union-controlled fort, became hundreds and later thousands of slaves in areas just north of the Mason Dixon line. In order to evade slave catchers, bounty-hunters, the figures paid to find and return fugitive slaves to their masters, empowered by Scott's law, some set up so-called contraband camps near Union Army encampments or outposts, said Bunch. One such camp grew in what is now Arlington Cemetery just outside Washington, D.C.

Some runaways also began to work for wages. They dug trenches and latrines, managed laundry and stole tasks related to war. Later when the Union Army began accepting black soldiers, some negotiated with commanding officers to bring their families along.

That drive towards self-liberation was first documented about 30 years ago, said Bunch, but most people have no knowledge of how slaves helped bring down the rebellion.

'I don't say this to take anything away from Lincoln' said Bunch, author of the 2010 book Call the Last Dream Rock: Essays on History Race and Museums. 'Ultimately the Emancipation Proclamation the 13th Amendment none of it would have happened without

Fax Test

Woohoo!

1

# Facsimile Transmission

**Subject:**

| | | |
|---|---|---|
| **To: hello** | **Fax Number: 1-510-545-0990** | **From** |
| **Date: 6/22/2007** | **Time: 8:00 PM** | **Pages: 1** |

**Company:**

**Disposition** | ]Urgent ( ]For Review ( ]Please Comment ( ]Please Reply ( ]Please Recycle ( ]Requires Action

**Comments / Notes:**

TEST
FROM
chicago

ALL WORK AND NO PLAY MAKES JACK A DULL BOY

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ALL WORK AND NO PLAY MAKES JACK A DULL BOY

DANNY ISN T HERE MRS TORRENCE

I do not want to bore you with a long boring explanation on how your footprint, so lets keep it simple

The more we buy new things, eat out, drive, travel, and so on, the more we effect the environment negatively We need to work on lowering our footprint number by wasting less, and thinking environmentally friendly

**3. Quantifiable Data**

The average American ecological footprint is 24 acres of land (Merkel, pg 93) That means on average one American uses in their life time 116 160 square yards or 1 045,440 square feet, that is equal to about 18 football fields. If every person in the world lived like we do we would need 5 planet Earths to sustain all of us. But we only have one, so we need to learn how to better preserve our planet and learn how to lower our Ecological Footprint

TOP

12345678

LEFT

Embedded Font ABC 123

12345678

Eight 8 Point
Ten 10 Point
Twelve 12
Fourteen

X

# US LETTER FAX TEST PAGE

X

Eight 8 Point
Ten 10 Point
Twelve 12
Fourteen

12345678

© 2008 by FaxLogic, LLC

RIGHT

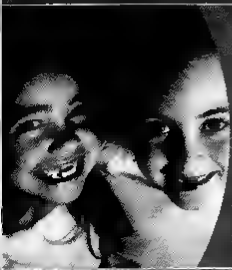
12345678

BOTTOM

# If your child could build a school...

## it would probably be a lot like ours!

**EARLY CHILDHOOD EDUCATION: INFANTS - SCHOOL AGE**



**(972) 335-3565**

**4915 Coit Rd, Frisco**

CLOSE TO CENTENNIAL HOSPITAL,
JUST NORTH OF HWY 121

**ASK US ABOUT OUR ENROLLENT SPECIALS!**

creativeworldschool.com

# Creative World

RLC test 10 45

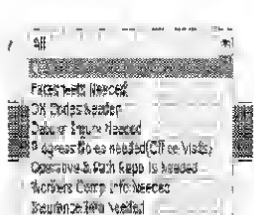
1ae63ae12ae

Portal Change – Clarification Module

27 May 2011

Please put these changes ahead of anything else happening with the portal as they impact Client offices.

Currently, in Clarification Module under the Category drop down menu it currently:




Please make the following changes to this menu

1. Rename "Facesheets" To "Demographics"
2. Rename "DX Codes" to "Codes"
3. In "Progress Notes" section, capitalize the "N" in "needed"
4. Also, in "Progress Notes" section, add an extra space between "Needed" and "(Office Visits)
5. Prior to "Misc Info Needed" please add the following 3 new categories:
    a. "Appeals-Referral Authorization"
    b. "Appeals-Precertification or Preauthorization Approval"
    c. "Appeals-Letter of Medical Necessity"

I'D SLEEP WITH
ANYONE!

For

NCR

**WORK ORDER** (Local Time)

| PART/RESPONSE INFORMATION | | | |
|---|---|---|---|
| Priority: | SLA Date/Time | WO#: | 5999853 |
| Tech and Pay | 08/20/20 6:00:00 | RMA#: | 56733431 |
| Part Description | | Customer: | CHICK FIL-A |
| CD10035 A KIT Illin CD 12V 5050 | | Site: | CHICK FIL-A 03400 |
| Part Number | | Address1: | 930 NORLAND AVE |
| 7163 1000 9090 | | Address2: | |
| Old Part/Number | | City: | CHAMBERSBURG |
| CD10035 | | State: | PA Zip: 17201-4203 |
| Date/Time Dispacted | | Contact: | Phone: |
| 8/19/2016 23:05 | | | |

**TECH INFORMATION**

| | | | |
|---|---|---|---|
| ASP | RYNO (Port Harbor FL) | Phone: | 412 592 5029 |
| Tech Assigned: | Gregan | Fax: | |

**DESCRIPTION OF PROBLEM**

Close drawer to start error shows on pos [Questions
Q-Rgt, Station pos 04
Q-Rgt Occurrence, 8/19,
Q-Rgt Drill Ind Symptoms advised crystal to check the ports (cd1)
adv cad Crystal to move cash drawer to see if error follows
moved fro n pos 04 to register 03 and register 03 then started to show the close drawer to start error
the drawer from 03 worked with no error on pos 04
Crystal states the drawer is closed so the terminal isn tin error still shows
checked cables on both registers
error is still present
when cash drawer is moved from 04 back to 03 the error leaves
accessing ledev to change port to see if that dispenses where error is
accessing server
reviewing properties of cash drawer
set to port 1 currently
setting to port 2 gen change send
having Crystal change ports to 2
error still appears
setting back to port 1
gen change send
replacing cash drawer for port 04
[Generated by Portal Login: Johns-c7 Contact: Cory Johnston n/a cory.johnston@accessfl.com]
Contact Name: Manager on Duty
Contact Phone: n/A

**Additional Notes (Radiant Dispatch Center Only)**

Check in/Out RDC 800-348-8832
Support 800 232 6776 1
Closing Info Required: MANDATORY always call the RDC before you leave site
Manager on Duty last name: Nicole
Support a Crystal issue: — NC support S/N W1187161100 TIC-00204
Defective Serial number:
Replacement Serial number: no serial on replacement part No tracking #.
Tracking number/Consignment note:

**CORRECTIVE ACTION**

Replaced cash register

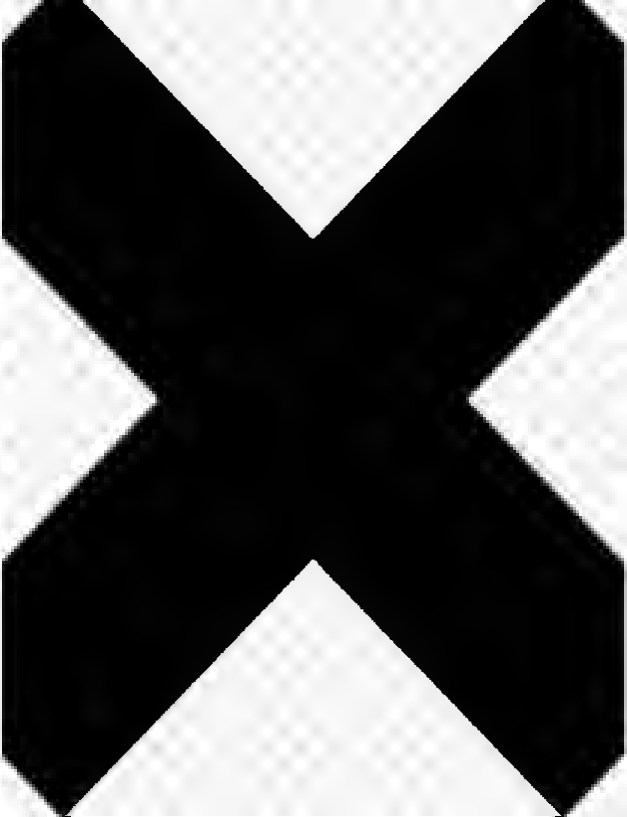
Name you closed the call with @ the site* Sandra Name you closed the call with @ the RDC* Sandra

Part return Waybill#

**CALL INFO** Date and time(Military Time)

| MILES | START | ARRIVE | COMPLETE | CUST INITIALS |
|---|---|---|---|---|
| 33 | 7 50 | 9 40 | 9 15 | NM |
| Brent | x 8 20 16 | x | Nicole | x NM Nicole |

8/19/16



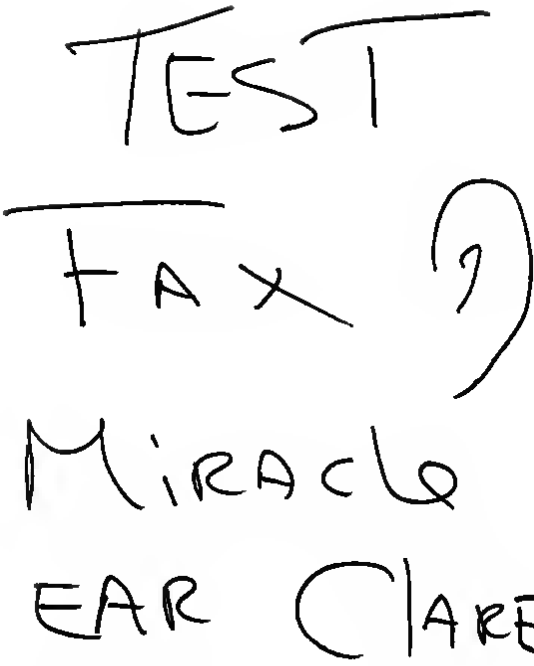
[redacted] TRANSMISSION REPORT

TIME 12/01/2013 03:50
NAME
FAX
TEL
SER.# [redacted]

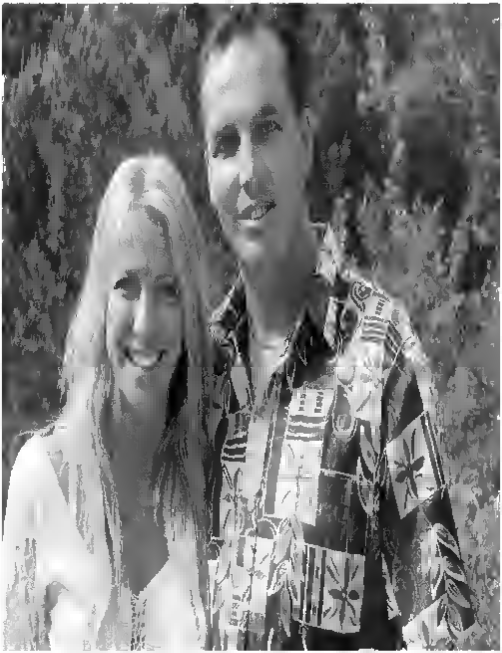
| | |
|---|---|
| DATE,TIME | [redacted] |
| FAX NO./NAME | [redacted] |
| DURATION | 00:03:27 |
| PAGE(S) | 02 |
| RESULT | OK |
| MODE | STANDARD |

[redacted] POOR LINE CONDITION

20 06


TEST
FAX ?
MIRACLE
EAR CARE

Test Fax
Please Ignore, Thank You.



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# SAN Zoning

In a simple SAN configuration where only 1 or 2 hosts are connected zoning is not terribly important however in more complex SANs where many hosts of different types and OSes along with tape libraries are connected zoning becomes crucial. Essentially the goal of zoning is to isolate the connected hosts from each other for security purposes. For example say you have both unix and windows hosts connected to the SAN along with a fibre channel tape library. You may want your Unix Netbackup or Legato server to control the tape devices but you discover that when the windows box rebooted following a blue screen that it saw the tape drives and automatically loaded drivers for them and configured windows to use them. Next the clueless windows admin notices this and starts doing windows backups on top of your carefog tapes. If you're the SAN administrator you'll probably start reading up on zoning between job interviews.

## SAN Types

There are 3 types of zones

- Port Zones - These are zones where physical ports on the switch are placed into a zone.
- WWN Zones - These are zones where World Wide Numbers are zoned together. A typical example would be the worldwide numbers of an array controller port being zoned with the world wide number of an HBA in a host
- Mixed Zones - These zones contain at least 1 port number and 1 WWN

## Important

For best security the zones should be hardware enforced and not software enforced. This is often referred to as " Hard Zoning" and "Soft Zoning". The distinction is that with software enforced zoning security is based on the assumption that hosts and devices logging into the switch fabric will only rely on the fabric name server for finding devices on the SAN. This is possibly a weak assumption. With hardware enforced zoning a host that is not zoned to see another device on the SAN will be prevented at a hardware level from seeing the device.

For newer Brocade silkworm switches, zones containing only

**The Wallace Collection**
47 Bluff Drive
Savannah GA 31406
Phone: (912) 224-9747 Fax: (912) 344-4007

# Purchase Order

PO No: **GREEN-0009**
Date 2/27/2003


**To:** Cowtan and Tout
111 Eighth Avenue
Suite 930
New York, NY 10011

Contact: Deirdre
Phone (212) 847 8900 Fax (212) 847-8906

**Ship To** Fmsealplus
1701 Westfork Dr
Suite 101
Lithia Springs, GA 30122

Contact: Larry
Phone (770) 941-0661

| Ship By | Ship Via | Account | Terms |
|---|---|---|---|
| | | 59700 | Net 30 |

| Quantity | Description | Unit Cost | Extended Cost |
|---|---|---|---|
| 6 yards | Cowtan & Tout<br>#F1406-07<br>Blue/ Livingston<br>*Ref #: 0025/002*<br>**Side Mark:** *Wallace Collection/Green/K-chairs* | 64.00 | 384.00 |

**Deposit Enclosed:** $ 0.00

Authorized Signature: _____ Date: _____

| | |
|---|---|
| **Item Total** | 384.00 |
| **Grand Total** | 384.00 |

TEST

1 855 330 1239

Thursday July 24, 2014

Reservation Confirmation

Confirmation #: 8901-3610-3250-201

Created: 07/24/2014 2:37 PM GMT

Booking Source: Hotel.com

Dear Ajesh Patel,

Thank you for the booking. Please review your reservation details below. Check in time is after 3 pm and check out is before 12 noon. Please write to us at reservations@hotel.com or call us at +1(408)-300-456 if you have additional questions.

Thank you,
Hotel.com

Ajesh Patel

| Booked by | Test Tester | Phone | Ajesh |
|---|---|---|---|
| Address | Aust | Zip code | 23423 |
| City | Aust | Country | SUDAN |
| Email Address | test1234@aol.com | Telephone number | 8012000 |

BILLING INFORMATION

| Card used | Visa | Exp. Date | 07/2014 |
|---|---|---|---|
| Card Number | 4111111111111111 | Owner name | Ajesh Patel |

ROOM RATE DETAILS

| Number of rooms | 2 | Number of nights | 2 |
|---|---|---|---|
| Check in Date | July 26, 2014 | Check out Date | July 27 2014 |

Room 1: Queen

| First Name: | Ajesh | Last Name: | Ajesh |
|---|---|---|---|

| Room Details | Date | Jul 26 | Jul 26 |
|---|---|---|---|
| | Rate | $22.00 | $22.00 |

Sub-Total $64.00
Tax(10.00%) $6.40 – Fees ($4.00) = Total $74.40

Note: Rates quoted in USD
Save 28.10% off on Queen

Room 2: Queen

| First Name: | Ajesh | Last Name: | Ajesh |
|---|---|---|---|

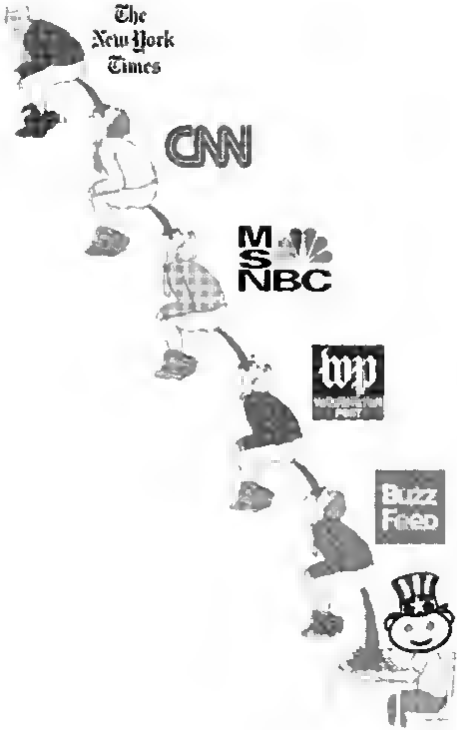
| Room Details | Date | Jul 26 | Jul 26 |
|---|---|---|---|
| | Rate | $11.00 | $11.00 |

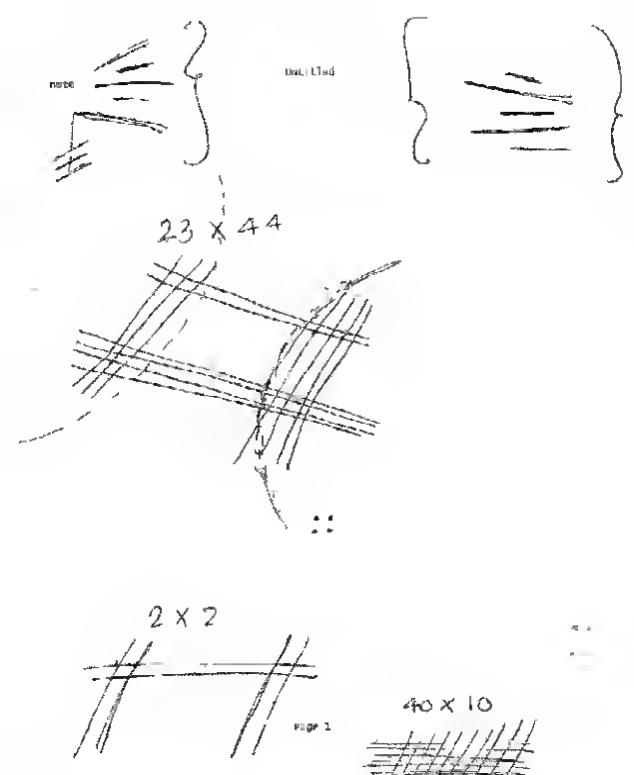
Sub-Total $64.00
Tax(10.00%) $6.40 – Fees ($4.00) Total: $74.40

Note: Rates quoted in USD
Save 10.00% off on Queen

Special Request Add

Thank you for choosing Hotel.com. We look forward to serving you in the future.


The New York Times
CNN
MSNBC
wp
BuzzFeed


23 X 44
2 X 2
40 X 10

**DUMMY FAX DOCUMENT**

**NO CONTENT HERE**

TEST

My
test

# Windows Printer Test Page

Congratulations!

If you can read this information, you have correctly installed your Brother HL-2280DW Printer on LENOVO M4 40

The information below describes your printer driver and port settings.

```
Submitted Time:     4:55 P, 6/26/2015
Computer Name:      LENOVOM4 40
Printer Model:      Brother HL-2280DW Printer
Printer Model:      Brother HL-2280DW Printer
Color Supported:    No
Port Name(s):       USB-DBAFC03B-BEFC-4BC1-A01B-E6AE3D5F1B0A, USB001
Data Format:        RAW
Share Name:
Location:
Comment:
Driver Name:        BRDHLB0A.DLL
Data File:          BRSH228CDW_0000.ESI
Config File:        BRUTM0A.DLL
Help File:          BRPRN10A_0000.CHM
Driver Version:     4.09
Environment:        Windows x64

Additional files used by this driver:
 C:\windows\system32\spool\DRIVERS\x64\3\BRSH228CDW_0004.JSI
 C:\windows\system32\spool\DRIVERS\x64\3\BRSH228CDW_0011.JSI
 C:\windows\system32\spool\DRIVERS\x64\3\BRSH228CDW_0012.JSI
 C:\windows\system32\spool\DRIVERS\x64\3\BRSH228CDW_0804.JSI
 C:\windows\system32\spool\DRIVERS\x64\3\BRSH228CDW_FC09.JSI
 C:\windows\system32\spool\DRIVERS\x64\3\BREH228CDW.DAT
 C:\windows\system32\spool\DRIVERS\x64\3\BRLCMM0A_0004.DLL          (1.09)
 C:\windows\system32\spool\DRIVERS\x64\3\BRLCMM0A_0409.DLL          (1.09)
 C:\windows\system32\spool\DRIVERS\x64\3\BRLCMM0A_FC09.DLL          (1.09)
 C:\windows\system32\spool\DRIVERS\x64\3\BRLCMM0A_0011.DLL          (1.09)
 C:\windows\system32\spool\DRIVERS\x64\3\BRLGMM0A_000C.DLL          (1.09)
 C:\windows\system32\spool\DRIVERS\x64\3\BRLCMM0A_0C0C.DLL          (1.09)
 C:\windows\system32\spool\DRIVERS\x64\3\BRLCMM0A_0007.DLL          (1.09)
 C:\windows\system32\spool\DRIVERS\x64\3\BRLCMM0A_0014.DLL          (1.09)
 C:\windows\system32\spool\DRIVERS\x64\3\BRLGMM0A_0004.DLL          (1.09)
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 C:\windows\system32\spool\DRIVERS\x64\3\BRLGMM0A_0006.DLL          (1.09)
 C:\windows\system32\spool\DRIVERS\x64\3\BRLGMM0A_0016.DLL          (1.09)
 C:\windows\system32\spool\DRIVERS\x64\3\BRLGMM0A_0416.DLL          (1.09)
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 C:\windows\system32\spool\DRIVERS\x64\3\BRLGMM0A_0C0E.DLL          (1.09)
 C:\windows\system32\spool\DRIVERS\x64\3\BRLGMM0A_0005.DLL          (1.09)
 C:\windows\system32\spool\DRIVERS\x64\3\BRLCMM0A_0015.DLL          (1.09)
 C:\windows\system32\spool\DRIVERS\x64\3\BRLCMM0A_001A.DLL          (1.09)
 C:\windows\system32\spool\DRIVERS\x64\3\BRLCMM0A_0018.DLL          (1.09)
 C:\windows\system32\spool\DRIVERS\x64\3\BRLGMM0A_001F.DLL          (1.09)
 C:\windows\system32\spool\DRIVERS\x64\3\BRLGMM0A_0019.DLL          (1.09)
 C:\windows\system32\spool\DRIVERS\x64\3\BRLCVM0A_0002.DLL          (1.09)
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 C:\windows\system32\spool\DRIVERS\x64\3\BRLLM0A_0012.DLL           (1.09)
```

HP LaserJet 200 colorMFP M276nw

# Fax Confirmation

Jun 24 2017 6 16PM

| Job | Date | Time | Type | Identification | Duration | Pages | Result |
|---|---|---|---|---|---|---|---|
| 0276 | 6/24/2017 | 6 16 28PM | Send | 7.2132942943 | 0 27 | | OK |

TEST

1212

# Warranty Information

**1-Year Limited Hardware Warranty**
Obihai Technology provides a 1 Year limited hardware warranty. Obihai warrants to customer that this product will conform to its published specifications and will be free from defects in material and workmanship at the time of delivery and for a period of 1-Year thereafter. Without limiting the foregoing, this warranty does not cover any defect resulting from (a) any design or specification supplied by an entity other than Obihai, (b) non-observance of technical operating parameters (e.g. exceeding limiting values) or (c) misuse, abuse, using in abnormal conditions or alterations of any kind.

**Replacement, Repair, Refund**
After the acceptance of a Return Material Authorization (RMA) request, Obihai will attempt to refund, repair or replace the product. To request an RMA, please contact the party from whom you purchased the product.

**ObiTalk Network – Do Not Use For Emergency Service Calls**
Obihai Technology does not warrant the availability or quality of the ObiTalk network. Furthermore, Obihai Technology will not be liable to you or any third party for any costs or damages arising directly and or indirectly from the use of the product's hardware & software including without limits any damage, or for any loss whatsoever.

Thank you for choosing Obihai Technology. www.obihai.com

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INNsight.com

Thursday, August 01, 2013

Fax To: [illegible]
Fax: [illegible]
Attn: [illegible]
Subject: [illegible]

[illegible] Confirmation [illegible]
[illegible]
Created: [illegible] 2013 [illegible]

Dear [illegible]

We are [illegible] the following [illegible] for [illegible] Confirmation [illegible]. If you [illegible] questions regarding [illegible] please contact [illegible] Support [illegible] support@innsight.com

Thank You
INNsight.com

[illegible]

Number of Rooms	1	Number of Nights	1
Check-in Date	August 29, 2013	Check-out Date	August [illegible]

[illegible]

First Name	Jeff	Last Name	[illegible]

[illegible]
[illegible]

[illegible]	Date	August 29
	[illegible]	[illegible]

[illegible]
[illegible] Total: $[illegible]

Note: [illegible]

Thanks for using INNsight.com [illegible]

FAX TEST

CANADA

# Fax Confirmation

Model Number: KODAK ESP Office 2170 Series

Fax Number:

Date/Time: 5/07/2012 6 40 PM

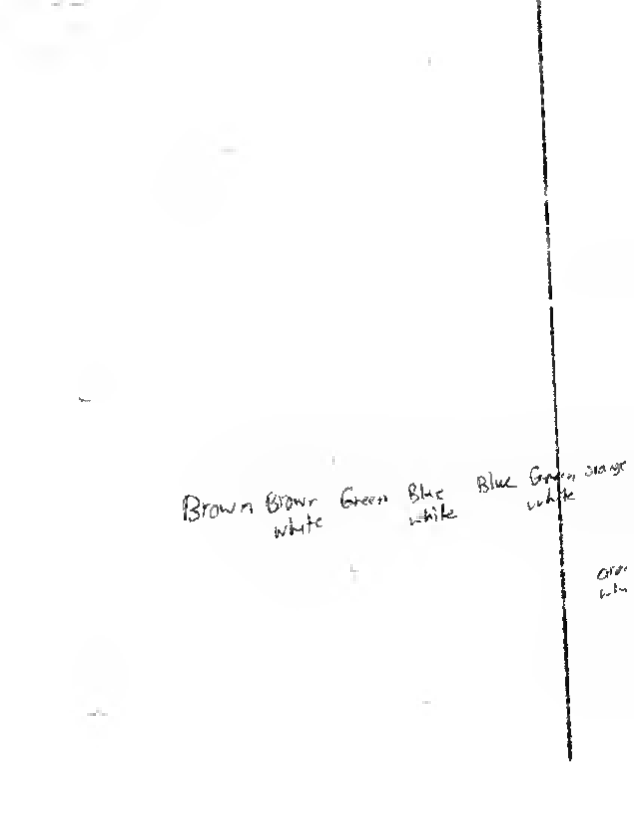
Fax Confirmation

| Date | Start Fax | Duration | Fax Type | To/From | Pages | Result |
|---|---|---|---|---|---|---|
| 5/07/2012 | 6 40 PM | :23 | Sent | 18733276564 | 0 | Error |

dfgdsfgdsg

FAX TEST
JOSEPH
1-888
877-165

This is a test fax


Brown
Brown white
Green
Blue white
Blue
Green orange white

# Find Out How Much Your Home Is Worth In Today's Market

Another property just sold in the neighborhood. Do you know how that affects the price of YOUR home?

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The first thing you'll need to know is how much your home is worth compared to other homes in today's market.

**It's easy to find out!**

Now you can get a FREE Home Price Report of homes for sold and sold in the neighborhood in the last 6 months - so you'll have a good idea of what homes like yours are selling for

PLUS: Get a Free Report on which improvements and fix-ups will give you the best return on your investment as you prepare your home for sale

To get the most current Home Price Report for your building just go to 30033MyHomePrice.com or call 404-564-7272 and we'll send it out right away.

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- Aide/Contact
- Accès rapides
- Imprimer
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- Livre d'or
- Nouveautés
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- Presse
- Recommander
- Signaler un bug
- …
- Webmasters
- Lien sur votre site

> Publicités

> Partenaires
- Jeux anglais
- Traducteur anglais
- Nos autres sites

Apprendre l'anglais > Cours & exercices d'anglais > Exercices d'anglais > test d'anglais n°27022: Présent en BE + ING

> Plus de cours & d'exercices d'anglais sur le même thème
- Présent [Autres thèmes]

> Tests similaires : - Test de niveau grammatical débutants - Présent en BE + ING - Présent simple - Fiche synthétique : présent simple / présent en BE + -ING - Présent simple - Thierry en Angleterre 6 : Auxiliaire BE - Présent : Les deux principaux présents anglais (grand cours)

> Double-cliquez sur n'importe quel terme pour obtenir une traduction

Présent en BE + -ING

Hello, How are you?

Le présent en BE + -ING était autrefois appelé **présent progressif ou présent continu.**

Ces noms ont été abandonnés car ces termes étaient trompeurs : les apprenants pensaient que ce temps ne pouvait servir que pour des actions en progression, ce qui n'est pas vrai.

Le nom 'présent en BE + -ING' veut dire qu'on va utiliser l'auxiliaire BE, suivi du verbe, auquel on va ajouter (avec une transformation ou non) ING à la fin. C'est pour cela qu'il y a un tiret devant ING.

Petit rappel :

Attention tout d'abord à ne pas confondre le présent en BE + -ING avec le présent simple

En poursuivant la navigation, vous acceptez l'utilisation de cookies pour des statistiques et des contenus liés à vos centres d'intérêt. InfosGestion OK

#2
DAD

CONDITION TYPE

Christmas decorations and products may only be returned until December 24 2011
All sales on Christmas items made after Dec 24 2011 are final

Christmas decorations and products may only be returned until December 24 2011
All sales on Christmas items made after Dec 24 2011 are final

No warranty or Refund without receipt
Will not deliver anywhere!!!

Dec 24 2011 are final

No warranty or Refund without receipt
Will not deliver anywhere!!!

Christmas decorations and products may only be returned until December 24 2011
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Will not deliver anywhere!!!

Dec 24 2011 are final

No warranty or Refund without receipt
Will not deliver anywhere!!!

www.bellcodeinc.com
OR www.bellcodeinc.com
PHONE 1-888-BELLCODE
PHOTOS available in the WEB ONLY
See Website for complete rules

Christmas decorations and products may only be returned until December 24 2011
All sales on Christmas items made after Dec 24 2011 are final

No warranty or Refund without receipt
Will not deliver anywhere!!!

Christmas decorations and products may only be returned until December 24 2011
All sales on Christmas items made after Dec 24 2011 are final

No warranty or Refund without receipt
Will not deliver anywhere!!!

TRANSMISSION VERIFICATION REPORT

TIME : 10/30/2011 07:59AM
NAME : ROSE GROUP HOME
FAX : 3055166934
SER.# : BROF1F232015

| | |
|---|---|
| DATE,TIME | 10/30 07:59AM |
| FAX NO /NAME | 15545561378 |
| DURATION | 00:00:02 |
| PAGE(S) | 02 |
| RESULT | BUSY |
| MODE | STANDARD |

BUSY: BUSY/NO RESPONSE

| (Recovery/living environment) | |
|---|---|

Counselor Signature

Counselor

Date Signed
9/7/2017

Supervisor Signature

Reginald J Passinger Clinical Supervisor

Date Signed
9/7/2017

**Confidentiality statement**

Information contained on this facsimile and the documents accompanying it are protected by Federal confidentiality rules (42 CFR part 2). The Federal rules prohibit you from making any further disclosures of this information unless it is expressly permitted by the writ en consent of the person to whom it pertains or as otherwise permitted by 42 CFR part 2.

# Monthly Wireless Data Plans

www.telusmobility.com

connect — Mobility. As daily living.

TELUS — authorized dealer

## Wireless*

| | Email & Web 15 | 25 | 40 | 60 | 100 | Pay per Use |
|---|---|---|---|---|---|---|
| **Monthly Rate ($)** | 15 | 25 | 40 | 60 | 100 | 0 |
| Incl. Email/Web use | 2Mb | 4Mb | 8Mb | 30Mb | 1024Mb | 0 |
| Included Voice min. | N/A | N/A | N/A | N/A | N/A | 0 |
| **Extras for Your Plan** | | | | | | |
| Additional Mb ($/Mb) | 2 | 12 | 8 | 6 | 4 | 30 |
| Additional Voice min. | 30¢ | 30¢ | 30¢ | 30¢ | 30¢ | N/A |
| Text Messaging | All Plans 15¢ / message | | | | | |
| U.S. Roaming ($/Mb) | 6 | 6 | 6 | 6 | 3 | 6 |
| Unlimited local N/W ($) | N/A | 15 | 1 | * | N/A | N/A |
| Extended Close ($) | N/A | 5 | 5 | * | N/A | 5 |

## Connect Wireless*

| | 5 | 25 | 40 | 65 |
|---|---|---|---|---|
| **Monthly rate ($)** | 5 | 25 | 40 | 65 |
| Mb included / Mb | 0 | 2 | 8 | 15Mb |
| Additional Mb ($/Mb) | 15 | 12 | 8 | 10Mb |
| Voice & make-up data calls | All Plans 25¢ / min. | | | |
| U.S. Roaming ($/Mb) | 15 | 6 | 6 | 3 |

## Connect Day*

| | 1 Day | 5 Day | 10 Day |
|---|---|---|---|
| **Monthly Rate ($)** | 15 / day | 50 | 75 |
| Mb included / min. use | 1 Day | 5 Days | 10 Days |
| Additional Days ($) | $7/day | $5/day | $5/day |
| U.S. Roaming ($) | All Plans $20 / day | | 1 Plan or Add On |

## BlackBerry*

| | Email & Web 15 | 25 | 40 | 60 | 100 | Email, Web, Dispatch 60 |
|---|---|---|---|---|---|---|
| **Monthly Rate ($)** | 1 | ** | 40 | 60 | 100 | 60 |
| Incl. Email/Web use | 2Mb | 4Mb | 8Mb | 12Mb | 1024Mb | 2Mb |
| Included Voice min. | N/A | N/A | N/A | N/A | N/A | Unlimited Voice Call to TELUS |
| **Extras for Your Plan** | | | | | | |
| Additional Mb ($/Mb) | 2 | 2 | 8 | 8 | 3 | 8 |
| Additional Voice min. | 30¢ | 30¢ | 30¢ | 30¢ | 30¢ | 30¢ |
| Text Messaging | All Plans 15¢ / message | | | | | |
| U.S. Roaming ($/Mb) | 6 | 6 | 5 | 6 | 3 | 3 |
| Unlimited local N/W ($) | N/A | 15 | 1* | 5 | N/A | 15 |
| Extended Close ($) | N/A | 5 | * | 5 | N/A | N/A |

## Add-ons*

| | Personal Email, IM 15 | 30 | Personal Email, IM & Web 30 | 45 |
|---|---|---|---|---|
| | * | 30 | 30 | 45 |
| Personal Email ‡ | Unlimited | Unlimited | Unlimited | Unlimited |
| Instant Messaging Windows Live Web-Messenger, Yahoo! Web-Messenger | Unlimited | Unlimited | Unlimited | Unlimited |
| Web Browsing & Applications eg. Facebook, etc.‡ | N/A | N/A | Unlimited | Unlimited |
| Text Messaging | N/A | Unlimited | N/A | Unlimited |
| U.S. Roaming | 6 | 6 | 6 | 6 |
| Calling Features | Call Display, Voice Mail ‡‡ | | Call Display, Voice Mail ‡‡ | |

* Not available in Quebec
‡ Web access charges apply for non-browser based applications. Not available on all devices.
‡‡ Voice Mail not available in Quebec

Prices subject to change without notice. TELUS reserves the right to cancel or correct errors, omissions or misprints without notice.

**1 Mb = approximately:**
300 emails (all 200 words or less)
20 emails (for email attachments)
20 word-processed pages

Weekends
Fri. 9:00 p.m. to Mon. at 7:00 a.m.
Nights
Mon. to Fri. 9:00 p.m. to 7:00 a.m.

US roaming:
99¢ /min. rate.
LD + Audio Conf. rate 10¢/ min.

*** See Promotions & Conditions Sheet for details.**

**Additional on all plans:** Enhanced 911 (E911) service access fee $0.85. All prices applicable rates or fees. Rate plans subject to change without notice. Not responsible for errors or omissions.

Wireless Rate Plans 09.08-1

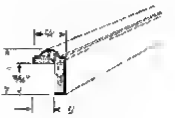
FAX

Test

6-10-456

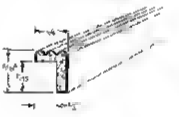
## Triple Bead Accent Molding

| SKU | NOTES |
|---|---|
| [illegible] | • [illegible] |



## Triple Bead Accent Molding

| SKU | NOTES |
|---|---|
| [illegible] | • [illegible] |



TEST PDF

☐ This is a test checkbox

faxZERO.com
send a fax for free

Recipient Information

To Chris
Company THD
Fax # 4107606574

Sender Information

From: Selan
Company Cisco
Email address sothema@cisco.com (from 203 123 181 177)
Phone # 0554433768
Sent on Friday July 15 2016 at 2 06 PM EDT

HI Test fax from Cisco

This fax was sent using the FaxZero.com free fax service. FaxZero.com has a zero tolerance policy for abuse and junk faxes. If this fax is spam or abusive, please e-mail support@faxzero.com or send a fax to 855-330-1238, or phone 707-400-6360. Specify fax #17342646. We will add your fax number to the block list.

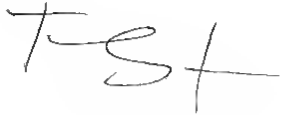
Signature

Date

**InfoPay**
Data Opt-Out Department
PO Box 130309
Boston, MA 02113

*This Opt-Out form must be signed either by the person requesting to be opted out or by their legal*

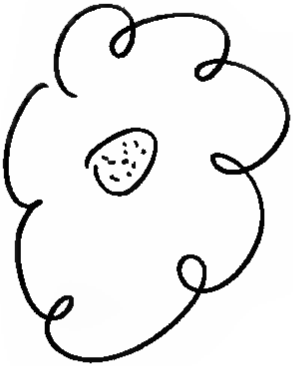
Tahoe MIX422



TEST 1

# הערה

Fax-licious!



1575-589 1239

Test 2

5252

BS

NOTE: Blocked calls are not displayed on this report.

For more information, see Junk Fax Report and the Caller ID Report.

**Last Transaction**

| Date | Time | Type | Station ID / Caller ID | Duration / Digital Fax | Pages | Result |
|---|---|---|---|---|---|---|
| Jan 12 | 1:01PM | Received | 805 934 6528<br>8059346528 | 0:02<br>N/A | 1 | error 232 |

A communication error occurred during the fax transmission. If you are sending, try again. If not, make sure the recipient fax machine is ready to receive faxes. If you are receiving, contact the sender and ask them to send the document again.

BACK
SIDE

TEST

$x^{2}+1$

$\#_{2}$

:

# BUSINESS OFFICE

## Payroll Deadlines for June and July 2018

| Payroll Information | June 20 Part-time Payroll | June 30 Full-time Payroll | July 20 Part-time Payroll |
|---|---|---|---|
| **Information Due to Human Resources** (Documentation for new hires, terminations, or changes only) | Fri June 1 | Thurs June 7 | Mon July 2 |
| **Payrolls & Information Due to Payroll Office** (address, tax, direct deposit changes) | Tues June 5 | Wed June 13 | Thurs July 5 |
| Pay Date | Wed June 20 | Fri June 29 | Fri July 20 |

### *ADDITIONAL INFORMATION*

Pay day for regular faculty working during the summer months will continue to be the last working day of the month.

| Part time Payroll Due Dates | June 20 Part-time | July 20 Part-time |
|---|---|---|
| Part-time timesheets/paysheets/contracts | Tues, June 5 | Thurs July 5 |

| Full-time Payroll Due Dates | June 29 Full-time | July 31 Full-time |
|---|---|---|
| Full-time timesheets/leave forms | May timesheets/leave forms due Thurs, June 7 | June timesheets/leave forms due Mon, July 9 |

### Deadline for Timesheets and Leave Forms

Annual, bonus, and sick leave forms for leave taken through June 30, 2018 **MUST** be submitted to the Payroll Office no later than 12:00 P M July 6, 2018 **Do not combine June and July leave dates on one form**

All timesheets through June 30, 2018 **MUST** sick be submitted to the Payroll Office no later than 12 00 P M July 6, 2018

This information is required for year-end reporting purposes Failure to submit appropriate forms by this deadline could result in audit exceptions

If you have any questions contact LaToya McCandles at extension 30355.

QA
Test
Only

Test
2

1 888-877-1635

Test fax from

N8

IIII

1

TOTAL P.01

DENZEL WASHINGTON
GARY OLDMAN
THE BOOK OF
ELI
LE LIVRE D'ELI

# Gdfgdsgjsdfg sdfgsdfg sgdsfgsdgsdgsd fg sdfgsdfg.

This message has been brought to you by the United Soviet Association for the Expansion and Development of Economic Programmes.

broadvoice™

# Test Facsimile

**Subject. Test Fax**

**Total Pages Including Cover: 1**

Hello,

This is a test fax sent for the purposes of isolating issues with faxing features Please report any errors that may appear

Thank you

# Ethernet 10/100/1000

## Standard Network Card

| | |
|---|---|
| Status | Connected |
| Speed, Duplex | 100 Mbps, Full Duplex (Auto) |
| 802.1x | Disabled |
| Current Date and Time | 2015-03-31 11:46 |
| Link-Job Timeout | 90 |
| LAA (MAC) | 00A [redacted]E4 |
| Firmware Version | [redacted] |
| Network Configuration | 49 Jan-14 22:59 published |

## Integrated Network Option Settings

| | |
|---|---|
| Protocol Type | Lexmark X548 |

## TCP/IP

| | |
|---|---|
| Active | On |
| Enable DHCP | On |
| Enable BOOTP | On |
| Enable RARP | Off |
| Enable Auto IP | Yes |
| Address Source | DHCP |
| IP Address | 10.31.25.13 |
| DHCP Lease Time (Seconds) | 691200 |
| Requested Lease (Seconds) | 691200 |
| Netmask | 255.255.[redacted]248 |
| Gateway | 10.34.22.1 |
| Host Name | [redacted]X548[redacted].plasmacenter.com |
| WINS Status | Unregistered |
| WINS Server | 10.17.0.11 |
| DHCP Server | 10.19.10.100 |
| DNS Server Address | 10.19.9.11 |
| Backup DNS Server Address | 10.21.9.12 |
| Enable TFTP | Yes |
| Enable FTP | Yes |
| Auto Configure on Error | Lexmark X548 |

## IPv6

| | |
|---|---|
| Active | On |
| Link-Local Address | [redacted] |
| DHCPv6 | On |
| IPv6 Address Source | Automatic |
| IPv6 Address | [redacted] |

## AirPrint™

| | |
|---|---|
| Active | Yes |

## AppleTalk*

| | |
|---|---|
| Active | Yes |
| Name | [redacted]X548 |

2010

AMERICAN SAFETY & HEALTH INSTITUTE

# CPR, AED, and Basic First Aid

## Student Handbook

# FAMILY PHARMACY SERVICES

308 WEST 16TH ST
FRONT ROYAL, VA 22630

Tel (540) 636-2222 Fax (540) 636-1282

## Fax Data

To: TEST, TOYTAX NET

Telephone: (540) 000-0000 Fax Number: (855) 330-1239

Date & Time: Aug-25-2014 04:56 PM

## Refill Authorization Request

Patient: TEST PATIENT D O B 01 01/1950

Patient Address: TEST FAXING 101 Patient Phone: (540)-636-2222

Rx Number: 0575235 Last Fill Quantity: 20

Drug Name: AMOXIC/CLAVUL 875MG TAB Last Fill Date: 08/21/14

☐ Sig: TAKE ONE TABLET TWICE A DAY

☐ Changes to Rx: _____

☐ Authorized with additional refills Dr

☐ Denied. Have patient call doctor DEA _____

☐ Signature _____ Date _____

☐ Name of Person Authorizing (please print) _____

**THIS PRESCRIPTION WILL BE FILLED GENERICALLY UNLESS PRESCRIBER WRITES 'daw' IN THE BOX BELOW**

☐ Dispense as written

This prescription is for 1 refill and authorization was requested by your patient. Please complete this form and fax it back to us at: (540) 636-1282

This message is intended only for the use of the individual or entity to which it is addressed and may contain information that is privileged, confidential and exempt from disclosure under applicable law. If you are not the intended recipient, you are hereby notified that any dissemination, distribution, or duplication of this communication is strictly prohibited. If you have received this communication in error, please notify us immediately by telephone and return the original message to us at the address listed above via the U.S. Postal service.

HP Officejet 6818
Personal Printer/Fax/Copier/Scanner

Log for
+6835100316987
+6835100316987
Dec 18 2019

Last Transaction

| Date | Time | Type | Status ID |
|---|---|---|---|
| Dec 18 | 11:07AM | Poll Received | |

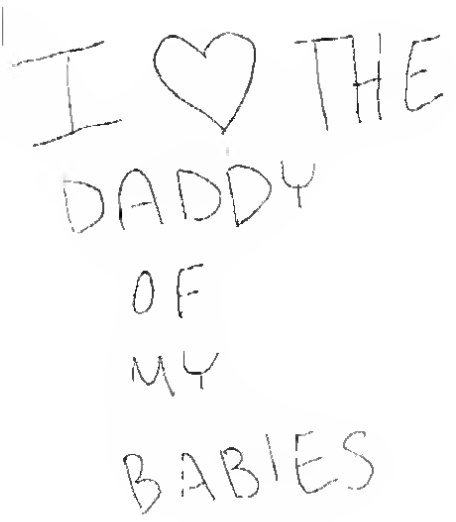
Electronically signed by Physician Test on 10/26/2011 at 10:14 AM EDT
Sign off status: Pending

MEDICIMS
1000 Oakland Drive
Kalamazoo MI 49008-1282
Tel 269-337-4484

Patient: Test, Test
DOB: 00/00/1977

Provider: Test, Physician,
Date: 10/15/2011

Note generated by eClinicalWorks EMR/PM Software (www.eClinicalWorks.com)


I ♡ THE
DADDY
OF
MY
BABIES

-Inclusive
Rate Plans
ow as

95 per month

lip Phones
as low as

0

ensive wireless coverage
ion of the Canadian population.

When adding your Sears Card
int for every dollar purchased
ect plan fees, excluding taxes,
ard credit.

redom to take advantage
with no additional fees

Make the switch to
**Sears connect**™
and keep your existing
wireless number!

**What is wireless number portability?**

Wireless number portability allows you the flexibility to shop for the best wireless value and change your service provider but still keep your existing wireless phone number.

**How do I switch my number to SearsConnect?**

It's easy - you can start saving today! All you need to do is call us at 1-866-668-9587 and we'll take care of the rest.

**Is there a charge for transferring my number?**

No. SearsConnect does not charge any fees for switching your wireless telephone number however cancellation charges may apply from your current provider. You should check with them.

**No Phone Activation Fee & No Shipping Fees**

**No-Risk 30 Day Money-Back Guarantee**

If you are not completely satisfied with your new SearsConnect phone, just return it within 30 days and before 30 minutes of use and receive a refund.

## Who we are

| | |
|---|---|
| **Who is providing this notice?** | You are receiving this notice from Citi-bank, N.A., the bank that issues your credit card. |

## What we do

| | |
|---|---|
| **How does Citibank protect my personal information?** | To protect your personal information from unauthorized access and use, we use security measures that comply with federal law. These measures include computer safeguards and secured files and buildings. |
| **How does Citibank collect my personal information?** | We collect your personal information, for example, when you<br>• apply for an account or give us your contact information<br>• give us employment information or apply for a loan<br>• use your credit or debit card<br>We also collect your personal information from others, such as credit bureaus, affiliates, or other companies. |
| **Why can't I limit all sharing?** | Federal law gives you the right to limit only<br>• sharing for affiliates' everyday business purposes–information about your creditworthiness<br>• affiliates from using your information to market to you<br>• sharing for nonaffiliates to market to you.<br>State laws and individual companies may give you additional rights to limit sharing. See below for more on your rights under state law. |

## Definitions

| | |
|---|---|
| **Affiliates** | Companies related by common ownership or control. They can be financial and nonfinancial companies.<br>• *Our affiliates include companies with a Citi name, financial companies such as Citigroup Global Markets Inc. and others such as Banamex USA.* |
| **Nonaffiliates** | Companies not related by common ownership or control. They can be financial and nonfinancial companies.<br>• *Nonaffiliates we share with include companies engaged in direct marketing and the selling of consumer products and services.* |
| **Joint marketing** | A formal agreement between nonaffiliated financial companies that together market financial products or services to you.<br>• *Our joint marketing partners include insurance companies and other financial companies.* |

## Other important information

**For Vermont Residents:** We will not share information we collect about you with nonaffiliated third parties except as permitted by Vermont law, such as to process your transactions or to maintain your account. In addition, we will not share information about your creditworthiness with our affiliates except with your authorization.

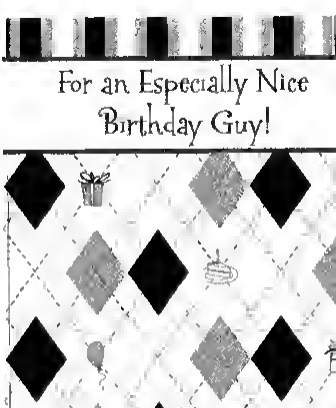
**For California Residents:** We will not share information we collect about you with nonaffiliated third parties except as permitted by California law, such as to process your transactions or to maintain your account.

### Important Information about Credit Reporting

We may report information about your account to credit bureaus. Late payments, missed payments or other defaults on your account may be reflected in your credit report.

© 2013 Citibank, N.A. Citi and Citi with Arc Design are registered service marks of Citigroup Inc.

Tender Thoughts



TESTING FAX

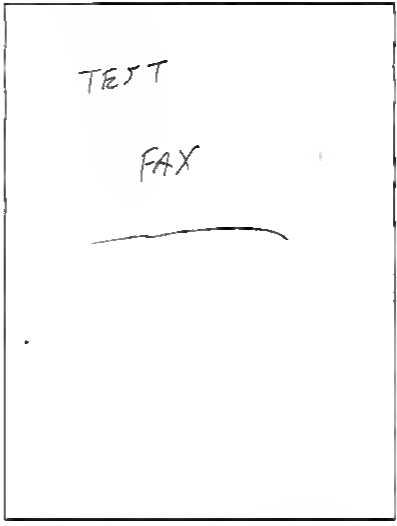
Please fax back to
360 563 0607

NORAH

# Fax failed

BJ Insurance Friday 12-16-2016 11:00

| Date | Time | Type | Job # | Length | Speed | Fax Name/Number | Pages | Stat |
|---|---|---|---|---|---|---|---|---|
| 12-16-2016 | 10:58 | SCAN | 37 | 0:00 | 0 | 5037777 | 0 | CANC |



INSIGHT IMAGINATION EXPERTISE AND FLAWLESS EXECUTION

# FACSIMILE COVER SHEET

1855 330-1239

To: [redacted] From
Fax: Date
Phone Pages: including cover sheet
Re: CC

Comments: WILL

Test FAX

1870 The Exchange, Huntsville, AL 35816 Office: (256) 881-7000 / Fax: (256) 721-9336 www.williamsnpc.com

NT 376-2007 10/

SEND FAX
TO:

610 644-5778

Guardian Angels Personal Care, LLC
Employee Status
January 2011

Test

fax

1-888-877-1655

Sunny

# EGAMES PO RECEIVED COVER SHEET

FAX NUMBER 213-365-4603

**ATTENTION: AL LEON** **NUMBER OF PAGES:** 4

**STORE.** Santa Ana "06" **DATE FAXED:** 9-11-09

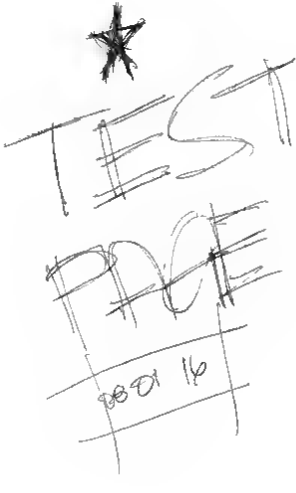
**PO NUMBER:** A9KMA-0 **VENDOR NAME.** UMED

**DATE PURCHASE ORDER WAS RECEIVED IN AR SYSTEM:** 9-11-09

**ASSOCIATE NAME:** Jorge Aguilera
PRINTED

**ASSOCIATE NAME:** Jorge Aguilera
SIGNATURE

**INCLUDE - ALL PO RECEIVING PAPERWORK- PO, RECEIVER, PACKING SLIP, BILL OF LADING


TEST
PAGE

Don’t use foul or abusive language. Let everything you say be good and helpful, so that your words will be an encouragement to those who hear them. Ephesians 4:29

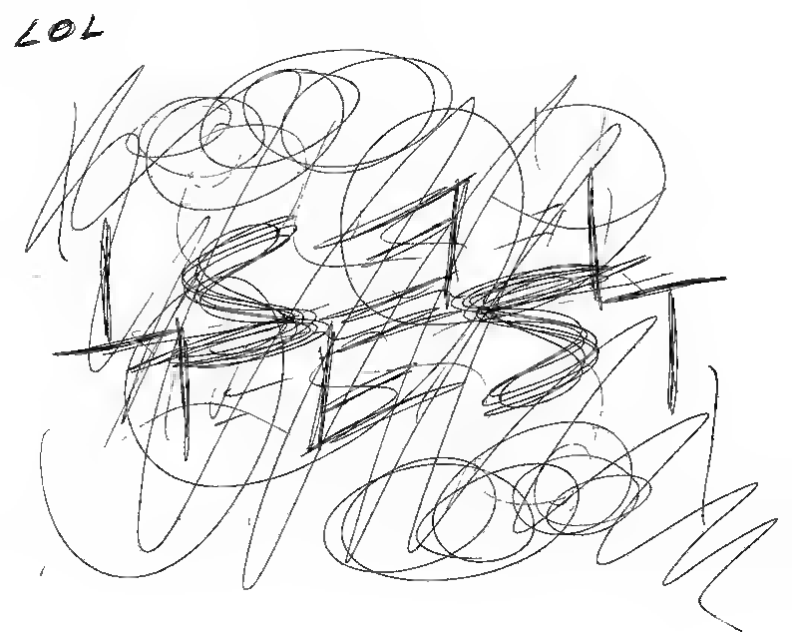
R. KELLY!

HELLO!!!

!!!HELLO!!!

HELLO!!!

R. KELLY!


LOL

# hp LaserJet Imprim. 4200

## page de configuration 1

### Informations sur l'imprimante

Nom du produit : hp LaserJet 4200
Nom attribué à l'imprimante : hp LaserJet 4200
Numéro normande : 7
Numéro de série de l'imprimante : CNFX11N0J0
Numéro du fabricant : A4027K5
Date de fabrication : 2003W30 04 016 1
ID service : 13243
PS Délai d'inactivité : 300 secondes
Nombre de pages : 134957
Période d'entretien préventif : 200000
Pages depuis la dernière maintenance : 130030

### Mémoire

Mémoire totale : 64 Mo
RAM : 64 Mo
Enregistrement automatique des ressources activé

### Journal des événements

Nombre d'entrées du journal des événements : 50
Nombre maximum d'entrées : 50
Les trois entrées les plus récentes

| Numéro | Nombre de pages | Entrée |
|---|---|---|
| 50 | 133242 | 13 03 04 |
| 49 | 131603 | 08 08 06 |
| 48 | 131569 | 13 03 04 |

### Réseau

Verrou du panneau de commande : AUCUN
Mot de passe panneau de commande : DESACTIVE
Privilège : DESACTIVEE

### Modes Imprimante installés

PS : 20020402)
PCL6 : (20010402)
PCL : (20010402)
Logement DIMM 1 : Côté 1 : Flash 0 Mo
Côté 2 : SDRAM 64 Mo

Logement DIMM 2 : Vide
Logement DIMM 3 : Vide
Logement DIMM 4 : Vide
EIO 1 : Vide
EIO 2 : HP Jetd rect 7067A
Stockage MASSIQUE : 11 Mo

### Options de manipulation papier

Format de papier par défaut : A4
Format bac 1 : TOUS : TAPPAT
Type bac 1 : TOUS : NORMAL
Format bac 2 : A4 : STANDARD

=== COVER PAGE ===

TO: _____

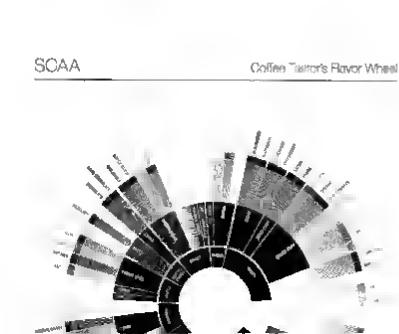
FROM: _____

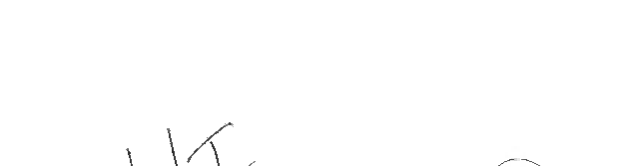
FAX:

TEL:

PAGE[S] TO FOLLOW

COMMENT:





PURCHASE ORDER NUMBER : 9710681187

20 PAGE NUMBER : 1

Supplier #: 71152818
MAKITA

PO BOX
BUFORD GA 18518

Phone : (888) 862 2464 EXT 1
Fax : (811) 110 1218

STORE 8718
THE HOME DEPOT
ATTENTION: TOOL RENTAL CENTER
7477 B BROADWAY BLVD
TUCSON AZ 85718

Phone : (770) 801-8430 EXT 12
Fax : (120) 722-9171

PO Creator: Tool Rental Programmer
Phone:

PO Contact: See above
Phone:

Bill To:
Tool Rental Payables
P.O. Box 105744

Atlanta GA 10148 5744

| ORDER DATE | PAYMENT TERMS | F.O.B | SHIP TO ARRIVE BETWEEN | |
|---|---|---|---|---|
| 11/14/2017 | 1% Net 30 | per SBA | 11/21/2017 | 11/28/2017 |

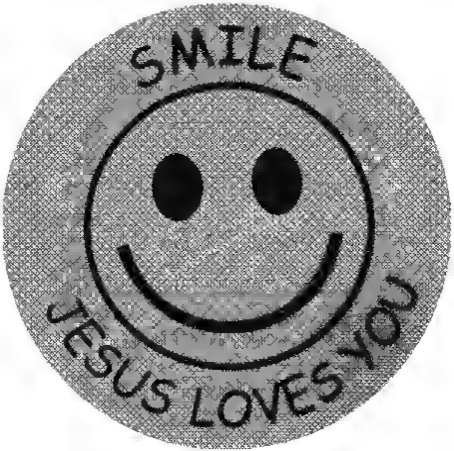
| Qty. Ord. | Part Number / Description | Model | Price | Amount |
|---|---|---|---|---|
| 1 | 751103 A<br>1-1/8X25" TAMPER BLADE BDL810 | | 29.80 | 29.80 |

ORDER TOTAL 28.80

Comments:

This is a test fax

Ben


SMILE
JESUS LOVES YOU

Is This thing on?

Treating Dream Company
[illegible]
[illegible]
Tel: [illegible]
www.[illegible].com

Attorney Counselor
Doug K. Attorney
Address 45/666 Counselor Circle
Lynchburg, MA 01107
Office Number: (800) 3294-6667 Ext 11111
Fax Number: (2 3) 299-2993

RE: Megan M Cindaro

Client Intake Counselor

This letter is to inform you that Megan M Cindaro received eating and alcohol evaluation and was referred to Treating Dream Company outpatient program on 3/13/2017 Ms. Cindaro was found appropriate for Partial care which will consist of weekly individual, group counseling, as well as nutrition eating counseling.

If you require any additional information please feel free to contact us at quicksand0000@gmail.com or by phone at (800) 333-6676

Respectfully,

E I T

3/16/2017
Intake Manager, MA
Substance Counselor

E I T

3/16/2017
Certified Nurse CADC LCADC LPC
Clinical Supervisor

xfinity

## 2. Personalizing your Wireless Gateway

A. Log In

- Open a web browser. Type http://10.0.0.1 in the address line. The Wireless Gateway Login page appears.
- Enter **admin** and password as shown in Fig. 6.
- Click **Login**. The *Home Network Wizard-Step 1* page appears.

Fig. 6 **Username cannot be changed**

B. Wireless Gateway Name and Password

- Create a name for your Wireless Gateway.
- Enter password as shown in Fig. 7
- Create a new password of your choice re-enter to confirm. (Use this password to change settings in the future.)
- For future reference, write your Wireless Gateway password here:

_____

- Click **Next Step**. The *Home Network Wizard-Step 2* page appears.

Fig. 7

* Your password must be at least 8 characters. It should contain both upper and lower case letters and at least 1 number.

## 3. Setting Up and Securing Your WiFi Network

A. WiFi Network Name

- Change the name of the WiFi Network that appears in Fig. 8 (The new name will appear in the list of available wireless networks.)
- For future reference, write your WiFi Network Name here:

_____

Fig. 8

B. Encryption Method

- Select an encryption method

The **Encryption Method** encrypts the data between your computer and your Wireless Gateway. WPA TKIP is the encryption method that is compatible with most computers. WPA2 PSK (AES) provides better performance and security and should be selected, but only if you are certain that your computer is compatible. Otherwise, select WPA-TKIP.

C. WiFi Network Password

- Create a Network Password. (This will be required by any computer to access your secure wireless network.)
- For future reference, write your WiFi Network Password here:

_____

D. IMPORTANT Final Step: Setting Up Your Secure Network

- Click **Finish**. Since you changed the WiFi settings, your computer will not be connected to the Wireless Gateway.
- View *Available Wireless Networks* and select the WiFi Network Name you created in step 3A.
- Enter the WiFi Network Password (case-sensitive) you created in step 3C.
- You should now be connected to the Internet.
- Test your connection by opening a web browser and typing in a valid URL (www.xfinity.com).

To view or modify your Wireless Gateway settings in the future, go to http://10.0.0.1
Learn more about your Wireless Gateway at http://customer.comcast.com/xfinitewireless

For help with your XFINITY services and features, refer to the appropriate user guide or call 1800 XFINITY.

Comcast

Test

888-
877-
1655

TEST

**Recipient Information**

**To: faxtoy**
**Fax #: 8888771655**

**Sender Information**

**From: Waitson**
**Email address: wattsonliao@gmail.com**
**Sent on: Wednesday, September 14 2011 at 7:03 PM EDT**

ttest

Save ink and paper -- receive your faxes via email next time. www.GeoffreyFaxMachine.com

This fax was sent using the FaxZero.com free fax service. FaxZero.com has a zero tolerance policy for abuse and junk faxes. If this fax is spam or abusive, please e-mail support@faxzero.com or send a fax to 800-980-5858. Specify fax #5448838. We will add your fax number to the block list.

Machine Information

Machine ID Items
- Model: Konica Minolta bizhub 25 PCL
- Device Serial ID: [illegible]
- ROM Version
  - Main: [illegible]
  - Network: [illegible]
  - PCL: [illegible]

Counter Items
- Print Count: 85028
  - Copy: 27932
  - Fax: 4430
  - PC Print: 52387
  - List: 379
- Scan Count: [illegible]
  - Copy: 16196
  - Fax: 1317
  - Scan: 24201

Network Items
- Host Name: [illegible]
- Workgroup: [illegible]
- IP Address: [illegible]
- Subnet Mask: [illegible]
- Gateway: [illegible]
- MAC Address: [illegible]
- DNS
  - Pr. DNS: [illegible]
  - Alt. DNS: [illegible]
- DNS Suffix: [illegible]
- DHCP
- e-mail: SCANNurse@youthvillages.org

Options Information
- HDD: Yes
- FAX Board: No
- PCL Memory: No
- CF Memory: 256MB(Standard)

Consumables
- Printed pages: 1150
- Toner remaining: 66%
- Drum remaining: 96%

Misc Items
- TTI Number
- Auto Distributes: OFF

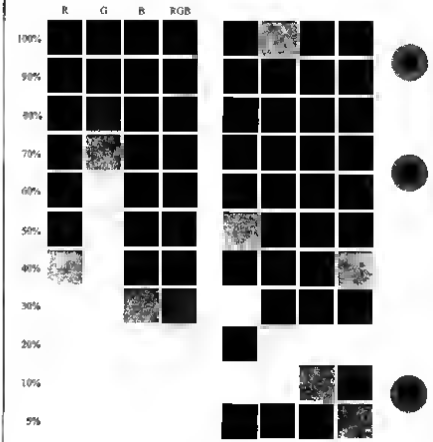
Consumables history

| | | |
|---|---|---|
| Toner | [illegible] | 1150 |
| Drum | [illegible] | 447/14200 |

TEST
6-17-14

# TESTINGfdsafsafdsafdsafsafwq45 dsafsadfsa

# Test Page



The quick brown fox jumps over the lazy dog.
The quick brown fox jumps over the lazy dog
The quick brown fox jumps over the lazy dog.
The quick brown fox jumps over the lazy dog.
The quick brown fox jumps over the lazy dog
The quick brown fox jumps over the lazy dog
The quick brown fox jumps over the laz
The quick brown fox jumps over th
The quick brown fox jumps ove
The quick brown fox jump

IMPORTANT NOTICE

Dear Member

The 2013 Evidence of Coverage that you recently received contained incorrect information This update will have no impact to your plan benefits The correct updated information is shown below Please keep this notice with your other member materials

If you have any questions or need any additional information about this notice please call Customer Service at the number listed on the back of your plan identification card 8 a.m. to 8 p.m., local time zone, 7 days a week

| Incorrect language in your Evidence of Coverage | Correct language in your Evidence of Coverage |
|---|---|
| The Explanation of Benefits (EOB) that we send to you will help you keep track of how much you and the plan have spent for your drugs during the year Many people do not reach the $2,970 limit in a year<br><br>We will let you know if you reach this $2,970 amount If you do reach this amount you will leave the Initial Coverage Stage and move on to the **Catastrophic Coverage Stage** | The Explanation of Benefits (EOB) that we send to you will help you keep track of how much you and the plan have spent for your drugs during the year Many people do not reach the $2,970 limit in a year<br><br>We will let you know if you reach this $2 970 amount If you do reach this amount you will leave the Initial Coverage Stage and move on to the **Coverage Gap Stage**<br><br>There is no impact to your plan benefits |

We apologize for the inconvenience but wanted you to be aware of the change as soon as possible Your enrollment in our plan is important to us, and we look forward to serving your needs in the future

Sincerely,

UnitedHealthcare

OOMA TEST X 2

Plans are insured or covered by UnitedHealthcare Insurance Company or one of its affiliates a Medicare Advantage organization with a Medicare contract and a Medicare-approved Part D sponsor

# Fax

| | | | |
|---|---|---|---|
| **To:** | Terry | **From:** | |
| **Company:** | | **Company:** | |
| **Fax:** | 1-855-330-1239 | **Fax:** | |
| **Phone:** | | **Phone:** | |
| | | **Email:** | |
| **Pages:** | 1 | **Date:** | 8/15/2016 |

**Notes:**
TEST

Test

# Title

## Smaller Title

Date and Time

TEST

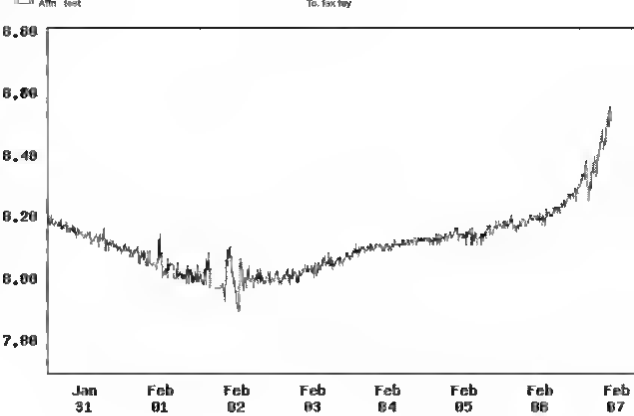
2zpoeSiv nu4TestTextFiletxt txt

test text file

7906

FAX
TEST
#2

Test


8.60
8.40
8.20
8.00
7.80
Jan 31 2017
Feb 01 2017
Feb 02 2017
Feb 03 2017
Feb 04 2017
Feb 05 2017
Feb 06 2017
Feb 07 2017
---- Provisional Data Subject to Revision ----

confidential

# fax

| | |
|---|---|
| *To* | tiny |
| *Fax Number* | 1 888 8771655 |
| *From* | Michael |
| *Fax Number* | |
| *Business Phone* | |
| *Home Phone* | |
| *Pages* | 1 |
| *Date/Time* | 2/25/2010 10:39:27 PM |
| *Subject* | i love you |

---

i love lisa

# FREE! ROAST BURGER™

**with soft drink purchase.**

©Offer valid through 01 [illegible] Limit [illegible] per visit. Limit [illegible] redeem valid at participating [illegible] or [illegible] location only. Not available [illegible] Void where prohibited. Cash redemption value [illegible] Customer pays any applicable sales tax. Prices, participation and product offerings may vary [illegible] Please see [illegible] for complete details. Offer valid at participating US locations. ©[illegible] 2008 Arby's, LLC. Arby's®

# Windows XP
# Printer Test Page

Congratulations!

If you can read this information, you have correctly installed your Canon iR-ADV C5045/5051 (FAX) on ec-sbs-00.

The information below describes your printer driver and port settings

```
Submitted Time    1 40 42 PM 3/25/2011
Computer name     ec_sbs_00
Printer name      \\ec-sbs-00\Canon iR-ADV C5045/5051 (FAX)
Printer model     Canon iR ADV C5045/5051 (FAX)
Color support     No
Port name(s)      192.168.4.105 FAX
Data format       RAW
Share name        Canon iR-5045(FAX)
Location
Comment
Driver name       CNFB0M_DD752.dll
Data file         iAC504FU.xpd
Config file       CNFB0MUI_DD752.dll
Help file         CNFBU_DD752.chm
Driver version    b.40
Environment       Windows NT x86

Additional files used by this driver
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\iAC504FU.cfg
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CNFR0409_DD752.dll  (b.40.0.0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CnxpOLsw.dll        (3.07.05)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CNXADP.dll   (8.40.0.0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CNXCE.dll    (8.40.0.0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CNXECP.dll   (8.40-0.0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CNXDMAN.dll (8.40.0.0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CNXP3FGU.dll          (8.40.0.0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CnXe3EU3.dll          (b.40.0.0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CnFX1UTS.dll          (b.40.0.0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CNFX2ESV.inf
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CNFX2EUA.dll          (b.40.0.0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CNFX2EUA.chm
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CNFX2EUC.dll          (8.40.0.0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CNFX2ECS.dll          (b.40.0.0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CNFX2EWS.dll          (b.40.0.0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CNFX2EMS.dll          (8.40.0.0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CPCIUS.dll   (5.3.1.1)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CPCIOS.dll   (5.4.4.5)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CPCIOH.exe   (5.4.4.5)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CPCIOQ.exe   (5.4.4.5)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CPCIQE.dll   (5.4.4.5)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CPCIOV.exe   (5.4.4.5)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CnXPCF32.dll          (2.4.0.0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CnXPCL32.dll          (2.4.0.0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CnXPVT32.dll          (2.4.0.0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CnXPTN32.dll          (2.4.0.0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\UCS32B.dll   (2.2.2.2)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CNLK.prf
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CNFXCH32.DLL          (3,4,0,0)
C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\CMDFFNK.DAT
```

# Fax

**FACSIMILE**

**Date** 5/14/2015

**To** 2132942943
**From** Casey Frederick

**Subject:** Test 1 2 3

123456789123456789123456789123456789

Test

FAX

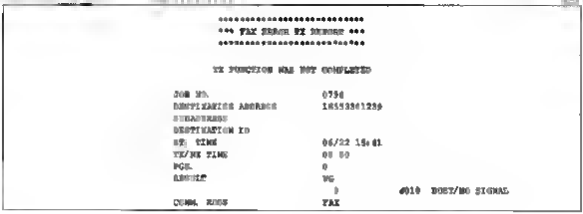
From Nicholson Construction

© 949-756-8394

888-473-2963

or

855-330-1239



*** FAX SENDER BY ZENDER ***

TX FUNCTION WAS NOT COMPLETED

| | |
|---|---|
| JOB NO. | 0736 |
| DESTINATION ADDRESS | 18553301239 |
| SUBADDRESS | |
| DESTINATION ID | |
| ST. TIME | 06/22 15:41 |
| TX/RX TIME | 00 00 |
| PGS. | 0 |
| RESULT | NG |
| | 0 #010 DOST/NO SIGNAL |
| COMM. MODE | FAX |

Test Fax

MSI

1 855 330 1239

Fax Toy

E. Zann

5494

FAX

TEST

#2

Test
117

# Using Fax

Fax provides you with complete fax facilities from your computer. You can configure fax settings, send and receive faxes, track and monitor fax activity, and access archived faxes. Using Fax, you can choose to send and receive faxes with a local fax device attached to your computer, or with a remote fax device connected to fax resources located on a network.

Fax is not installed by default during Windows Setup.

**To install the Fax component**

1. Open Add or Remove Programs in Control Panel.
2. Click **Add/Remove Windows Components**.
3. In the Windows Components Wizard, select the **Fax Services** check box, and then follow the instructions on your screen.

Notes

- To open Fax after installation, click **Start**, point to **All Programs**, point to **Accessories**, point to **Communications**, and then click **Fax Console**.
- For more information on using Fax, click **Help** in Fax Console.

Test

**COPIE DU CRÉANCIER HYPOTHÉCAIRE**

CLAUSE RELATIVE AUX GARANTIES HYPOTHÉCAIRES

**Numéro de police : 42815871-001**

## CLAUSE RELATIVE AUX GARANTIES HYPOTHÉCAIRES – FORMULAIRE B3

| | | |
|---|---|---|
| **Violation du contrat** | Art. 1 | Ne sont pas opposables aux créanciers hypothécaires les actes, négligences ou omissions d'une propriétaire, locataire ou occupante ses biens assurés, notamment ce qui est contraire aux conditions du présent contrat, ou visant à influencer ses droits en vertu de celui-ci, dans la mesure où ces dispositions ont cause préjudice. |
| | | Les créanciers hypothécaires sont tenus d'aviser l'assureur (si ce n'est déjà fait par un autre propriétaire) de tout changement qui accroît considérablement le risque de sinistre ou augmente la valeur de plus de cinq (5) pour cent de la valeur assurée, de toute augmentation du risque, à chaque prime, sur demande raisonnable, ces exigences doivent être satisfaites aux exigences réglementaires prévues dans la police pour le présent contrat, et cela jusqu'à ce que le créancier hypothécaire ait reçu un avis écrit de l'assureur. |
| **Subrogation** | Art. 2 | Jusqu'à concurrence des intérêts reconnus par le présent contrat hypothécaire, l'assureur est subrogé dans les droits de ses clients contre les débiteurs ou propriétaires assurés à qui il a versé l'argent pour indemniser un sinistre ou, lorsque cette hypothèque n'en dépasse pas les limites, de tout autre créancier hypothécaire ayant des droits sur ces biens. L'assureur ne pourra en aucun cas exercer de droits de subrogation contre un créancier hypothécaire, auquel cas le présent article ne s'applique pas à ces créanciers hypothécaires. |
| **Nullité de garanties** | Art. 3 | Si des garanties ou sûretés, y compris des cautionnements, sont annulées par des créanciers hypothécaires, sans préjudice de ses droits, l'assureur a le droit d'exercer ses droits contre la propriété assurée, dans la mesure où ces garanties ou sûretés auraient été valables. |
| **Préavis de cessation d'intérêt ou d'intérêt** | Art. 4 | En cas d'intérêt ou d'intérêt de l'assuré ou de celui qui a le pouvoir de représenter ou représenter de la même manière et dans les mêmes conditions que les créanciers hypothécaires, ces derniers ont le droit de recevoir un préavis écrit de quarante-cinq (45) jours avant la date d'entrée en vigueur de la cessation d'intérêt ou d'intérêt. |
| **Cessation ou modification** | Art. 5 | Les effets de la présente clause commencent au même temps que le contrat, sous réserve des droits de l'assureur prévus par les polices aux termes de celles-ci et de droits que certaines juridictions accordent aux parties de mettre fin à une police ou de la modifier. Lorsque de telles lois ou réglementations prévoient des délais plus longs, ces délais prévalent. |
| **Saisie ou transfert de biens** | Art. 6 | Si les créanciers hypothécaires ou leurs agents font exécuter par saisie ou saisie-arrêt, ou font valoir des droits de propriété des biens assurés, ils ont droit, dès lors, à la date de la prise de possession, de la saisie ou de la saisie-arrêt, à l'assurance de ces biens. |

Aux conditions ci-dessus, lesquelles doivent être remplies avant que les créanciers hypothécaires aient droit à la police du contrat d'assurance, il est convenu que, les créanciers hypothécaires ont droit à la police du contrat d'assurance.



La Cie d'assurance générale inc.

CHICAGO MIDWAY AIRPORT (877) 283-0898	CHICAGO MIDWAY AIRPORT
MAP IT	MAP IT

PAYMENT INFO

Currency:	U.S. DOLLAR
Rate Code:	RCHD2
Your Rate:	2 Days at $15 90 per day Unlimited mileage

Estimated Mandatory Charges:

Rental Time Charge:	$31.80
Apt Conc Recov Fee	$3 83
Cust Facility Chrg	$9 50
Vehicle License Fee	$2 70

Estimated Tax

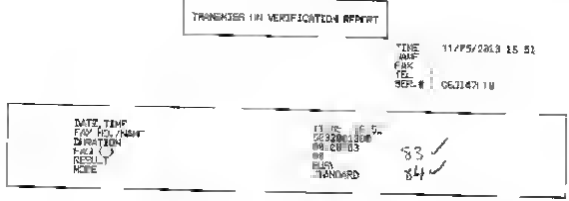
State Tax	$6 05

Estimated Grand Total	**$55 68**

TRAVELERS ALERT! CASHLESS TOLLS

Throughout the country, there is a movement by many highway authorities to eliminate the ability to pay cash for tolls. These roads are called "Cashless Tolls," which means there is no ability to pay cash once you have entered onto those highways.

If your travels take you to a destination where these Cashless Tolls exist and you are




X85 can you read me? how's that

86 is this any better? in band DTMF

Attempt #1 BROADVOX TRIAL GRANDSTREAM 702

WENT THROUGH FIRST DIAL

TONE HEARD AT END

T.38 SESSION ESTABLISHED @ START

ATTEMPT #2. BROADVOX TRIAL GXP HT 702

Ugly Negotiation thing

SECOND MACHINE

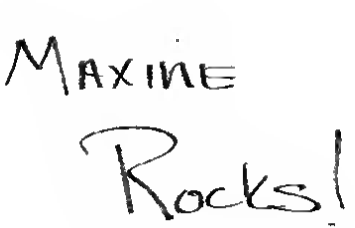
BROADVOX

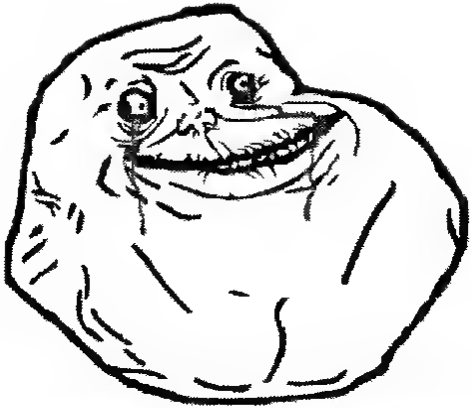
GRANDSTREAM

4! 5?

test text file

kyhmyvww uihTestTextFiletxt txt


MAXINE
Rocks!



FOREVER ALONE

From Fax Number (512) 329-0000

**Test**

# Fax

| | | | |
|---|---|---|---|
| **To:** | Test | **From :** | Test |
| **Fax** | (866) 330-1239 | **Subject** | Test |
| **Phone :** | Test | **Date** | 04-12-2016 |

**• Comments**

This is only a test.

9/9 V62 1752

TEST FAX

ცანი ანც ბ/ბ

ცანი-ანც-ცც

Test2003

FROM

TO

Name: ROBERT [illegible]

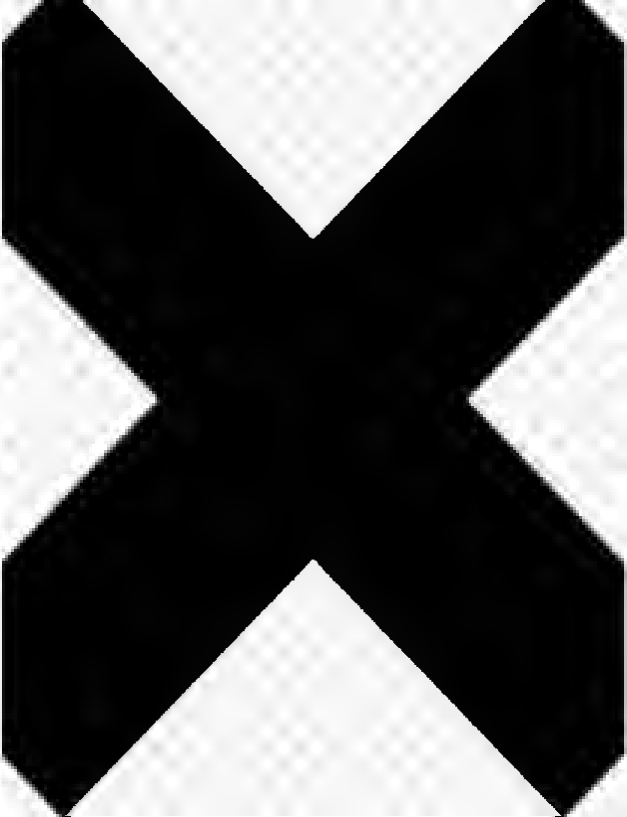
Phone: [illegible] Fax: 317-[illegible]-3545 [illegible]-330-1451

E-mail: rdolan@[illegible]engineeringfirm.com

Sent: 12/16/[illegible] 4 at 4:47:07 AM pages (including cover)

Subject: Test Hum[illegible]S

Comments:



# FAX TEST

M1 - 08 - East

LC

TEST

BY:

AcEMaN

thx

wazabe

you + hp

FaxBack System Test

Thank you for choosing hp

## Other useful hp web sites

**www.hp.com/register**
Use this web address to register your HP product

**www.hp.com/support**
Use this web address to obtain additional support for your product

**www.hpshopping.com**
Use this web address to order supplies and accessories for your HP product

## Help us help you

We're interested in your feedback on this fax verification process. Send your comments to

**faxfeedback@hp.com**

hp invent

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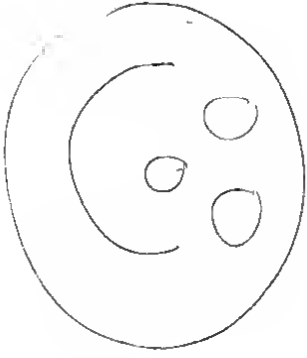
www.hp.com

ello -fron
A



TEST 1 John

TEST 2 Dave

TEST 3 Brenda

TEST 4 Rachael

TEST 5

TEST 6

TEST 7

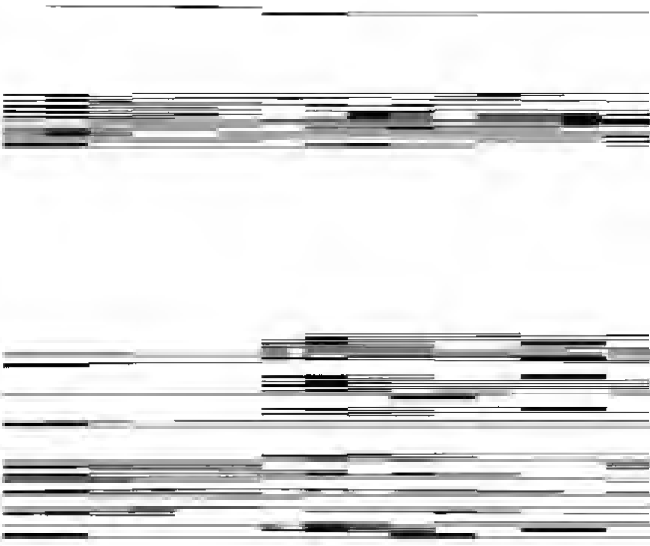
TEST 8

TEST 9

**CUSCO**

11249 BUSINESS CENTER ROAD    HILL VALLEY    CA 95420-4845

# YOU'RE FIRED!!!



HELLO WORLD 5/19/2017 10:50AM

10/25/20 4 11:02 FAX

Doc

*** ERROR TX REPORT ***

TEST

INCOMPLETE TRANSMISSION

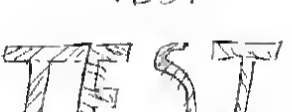
| | |
|---|---|
| JOB NO. | 0008 |
| DESTINATION NUMBER | [redacted] |
| DESTINATION ID | |
| ST. TIME | 10/25 11:02 |
| COMMUNICATION TIME | 00'35 |
| PAGES SENT | 0 |
| RESULT | NG #018 |
| | LINE BUSY |

PIXMA
UOMA

*99

X99

TEST



# FAX

**To** test
Company
Fax
Phone

**From:**
Fax
Phone
E-mail

**NOTES**

This transmission contains personal health information that you are required by law to maintain in a secure and confident al manner. Redisclosure is prohibited. Failure to maintain confident ality or re-d sc osure without authorization could result in penalties as described in State and Federal law

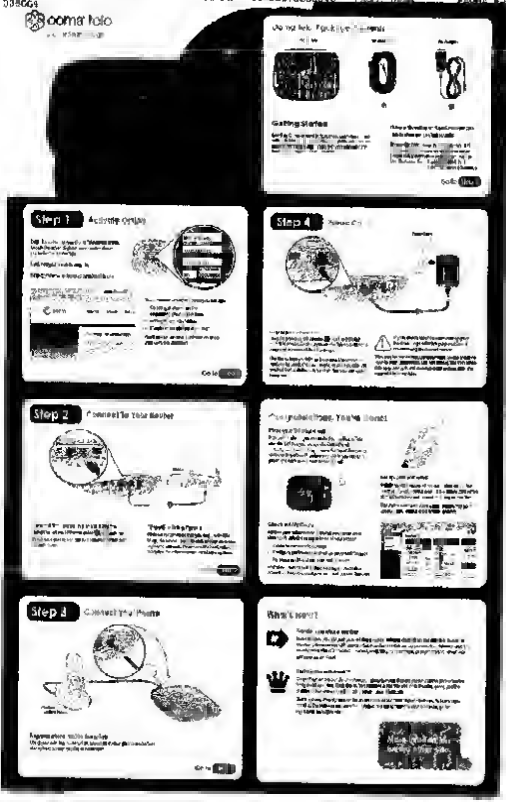
Date and time of transmission
Number of pages including this cover sheet

TRANSMISSION VERIFICATION REPORT

TIME : 04/23/2010 09:40
NAME : MURALI
FAX : 2012504875
SER. # : BROF9F216761

| | |
|---|---|
| DATE,TIME | 04/23 09:40 |
| FAX NO./NAME | 19085771540 |
| DURATION | 00:00:27 |
| PAGE(S) | 01 |
| RESULT | OK |
| MODE | STANDARD |

test
fax


Step 1
Step 2
Step 3
Step 4
What's next!

SHARP

*All Custom Setting List*

**MX-M503N**

S/N 3501497500



## HARDWARE STATUS

**Machine Information**

| | |
|---|---|
| Resolution | 600dpi |
| Language | American English |

**Copier Memory**

| | |
|---|---|
| Base Memory | 640MB |
| Optional Memory | 0MB |
| Total Memory | 640MB |

**Printer Memory**

| | |
|---|---|
| Base Memory | 1024MB |
| Optional Memory | 0MB |
| Total Memory | 1024MB |

**HDD**

| | |
|---|---|
| | 76.3GB |

**Total Count**

| | |
|---|---|
| | 1 |

**Firmware Version**

| | |
|---|---|
| PCL | 01.07.03 |
| MAIN | 03.04.03 |
| BOOT | 01.06.03 |
| SCANNER | 02.01.03 |

**Installed Device**

| | |
|---|---|
| Paper Feeding Option | Dual/2x500 Sheet Paper Drawer |
| Paper Exit Option | Finisher (Large Stacker)<br>Right Tray |
| Expanded Feat. | Not Installed |

## SOFTWARE STATUS

**Network Information**

| | |
|---|---|
| NIC Firmware Version. | 01.05.00 |
| IPv4 Address | ---.---.---.--- |
| Subnet Mask | ---.---.---.--- |
| Default Gateway | ---.---.---.--- |
| Device Name | SC49204D |
| Domain Name | Sharp-Printer |
| TCP/IP | Enable |
| DHCP | Enable |
| NetWare | Enable |
| EtherTalk | Enable |
| NetBEUI | Enable |
| IPv6 | Disable |
| IPsec | Disable |

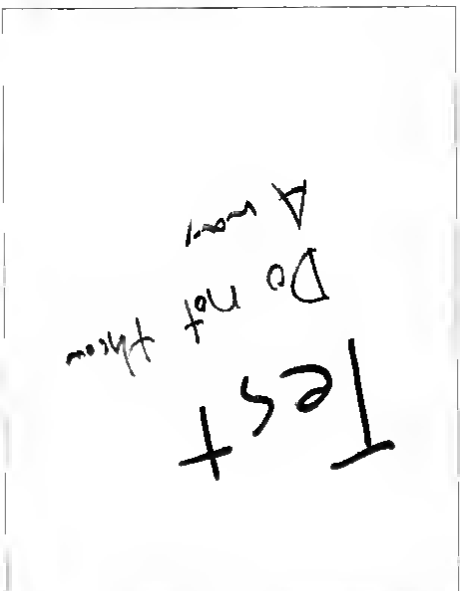
**PCL Emulation**

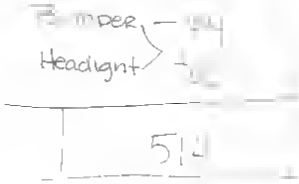
| | |
|---|---|
| Font Source | Internal Font |
| Font Number | 0 |
| Font | Courier |
| Pitch Size | 10.00 |
| Font Size | 12.00 |
| Symbol Set | PC-8 |

# Transmission Log

123 Thursday, 2015 07-02 08:33 123

| Date | Time | Type | Job # | Length | Speed | Fax Name/Number | Pgs | Status |
|---|---|---|---|---|---|---|---|---|
| 2015 07-02 | 08:33 | SCAN | 00344 | 0:16 | 14400 | FAXTRAN10 | 1 | OK - V 17 AM31 |




Headlight
51

[redacted]

| | |
|---|---|
| Study ID: AX | Name: DAVID BROWN |
| Attn: [redacted] | Fax No: [redacted] |
| Name: [redacted] | Sample Collection Date: 07/09/20[redacted] |
| Specimen: [redacted] | |
| Address: [redacted] | |

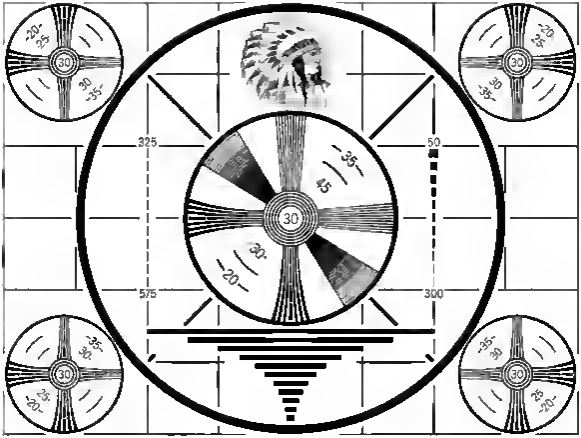
| Test Name | Result | Unit | Flag | Ref Range |
|---|---|---|---|---|
| Urea Nitrogen | 12 | mg/dl | D | 14 [redacted] |
| Creatinine | 1.2 | mg/dl | | 0.6 [redacted] |
| Glucose | 147 | mg/dl | | 64 [redacted] |

David Brown

Laboratory Director [redacted] Date: 07/09/[redacted]

TEST

DBCLLC


325
50
575
300

**FINE RESOLUTION**

Test Fax
Please Ignore, Thank You.

you + hp

FaxBack System Test

Thank you for choosing hp.

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Use this web address to order supplies and accessories for your HP product

## Help us help you

We're interested in your feedback on this fax verification process. Send your comments to

fax.feedback@hp.com

hp
invent

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www.hp.com

**Journey To**
220 Ma
Perth Amb
Tel. (732) 709-7440
www.tre

Dear Balls Gulp

Please be advised that your client, **Client 0817 T QA Test**, did r
**12/28/2016**

If you require any additional information, please feel free to contac
**(732) 709-7440**

Respectfully,

Adobe Acrobat PDF Files

Text from Phylactic

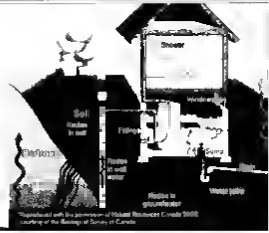
FOLLOW THE

WHITE RABBIT

RUN FOR YOUR LIFE?

# RADON – WHAT YOU NEED TO KNOW

## WHAT IS RADON?




*Reproduced with the permission of Natural Resources Canada 2010, courtesy of the Geological Survey of Canada

## WHAT ARE THE HEALTH RISKS?

- Radon exposure is the number two cause of lung cancer after smoking. Lung cancer is the only known health risk from radon.
- People who smoke AND are exposed to radon have an even higher risk of lung cancer.
- The health risk from radon is long-term not immediate. The longer you are exposed to high levels of radon, the greater your risk.

## HOW DO I TEST MY HOME FOR RADON?

- Testing for radon is easy and inexpensive.
- Buy a radon test kit online, by telephone or from a retailer. Health Canada recommends you buy a long-term test kit – one that measures radon levels for a minimum of three months.
- Put the radon detector in the lowest lived-in level of your home and leave it there for at least three months. Afterwards, mail it to the manufacturer and they will send you the test results.

## MY HOME TESTED ABOVE THE 200 Bq/m³ LIMIT. WHAT NOW?

- If the radon level in your home is above the guideline of 200 Bq/m³, you need to fix it. The higher the radon level in your home, the sooner it needs to be fixed.
- There are many ways to reduce your home's radon level. The most common method is active soil depressurization (ASD), typically performed by a contractor.
- We expect that only a small percentage of Canadian homes will have radon levels above the guideline.

FOR MORE INFORMATION ON RADON, VISIT [illegible] OR CALL 1-800 O-CANADA

© His Majesty the Queen in Right of Canada, represented by the Minister of Health, 2010 HC Pub: 05484 Cat: H[illegible]-10-1E ISBN 978-1-[illegible]-9

Health Canada | Santé Canada | THE LUNG ASSOCIATION | Association médicale canadienne | Canadian Medical Association | CANADA'S DOCTORS [illegible] healthy living

HP Officejet 8500 E710a-f All-in-One series

Fax Test Report for

262-888-0809
Jan-00-00 00:00AM

| | |
|---|---|
| Fax Hardware Test | PASS |
| Fax Connected to Active Telephone Wall Jack | PASS |
| Phone Cord Connected to Correct Port on Fax | PASS |
| Using Correct Type of Phone Cord with Fax | PASS |
| Dial Tone Detection | PASS |
| Fax Line Condition Test | PASS |

**Your HP device has passed the fax test.**

The fax settings can also affect the performance of your HP device. Please check your current fax settings listed below.

| | |
|---|---|
| Language | English |
| Country/Region | USA |
| Auto Answer | On |
| Rings to Answer | 2 |
| Fax Paper Size | Letter |
| Tone or Pulse Dialing | Tone Dialing |
| Fax Sound Volume | Soft |
| Distinctive Ring | All Rings |
| Busy Redial | Redial |
| No Answer Redial | No Redial |
| Automatic Reduction | On |
| Backup Fax Reception | On |
| (ECM) Error Correction Mode | On |
| Fax Speed | Medium (14400) |
| Fax Forwarding | Off |

Refer to your User Guide for more information on the fax test and settings.

Instructions on how to rerun this test:
Step 1: Press the "Setup" button
Step 2: Choose the "Tools" menu
Step 3: Choose the "Run Fax Test" item

CN16F323J805JZ

SYM2FN1110AR

| | |
|---|---|
| To | Fax Toy |
| Fax number | 18888771655 |
| From | Bryan Crow |
| Fax number | 9315520939 |
| Phone number | 9316475011 |
| Date & Time | 1/4/2010 |
| Pages | 1 |
| Re | TEST |

Fax Toy

HONDA

Financial Services

**TO:** Test Fax

Company

Fax [redacted]

Phone

**FROM:**

Fax

Phone

**NOTES:**

Date and time of transmission Tuesday June 10 2014 9:20:56 AM

Number of pages including this cover sheet 01

This communication is CONFIDENTIAL and is intended only for the addressee(s) named above. If you are not the intended recipient or the employee or agent responsible for delivering the message to the intended recipient(s), please note that any dissemination, distribution or copying of this communication is strictly prohibited. Anyone who received this communication in error should notify the sender promptly by telephone and return the original message to the person sending it the received above via the U.S. Mail.

American Honda Finance Corporation

Error Report (Send)

Send job resulted in error.

| | |
|---|---|
| Job No. | 0004 |
| Address | 14844420858 |
| Name | |
| Start Time | 12/22 04:30 PM |
| Call Length | 06:00 |
| Sheets | 0 |
| Result | NG |
| | #018 Busy Tone Signal |

888 877 1655

Hello

This is test

test text file

ycgrebyj d4bTestTextFile txt

# Fax

| | | | |
|---|---|---|---|
| **To:** | REST Test | **From:** | dev_fax_svc |
| **Company:** | co | **Company:** | |
| **Fax:** | 8883301238 | **Fax:** | |
| **Phone:** | 8006561212 | **Phone:** | |
| | | **Email:** | dev.fax.svc@test.hostfax |
| **Pages:** | 1 | **Date:** | 9/28/2017 |

**Notes:**

Recipient Information
To: Old Forge Hose and Engine Co
Company: Ladder 93
Fax #: 5794571124

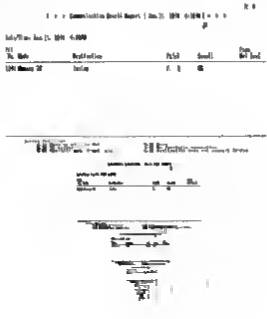
Sender Information
From: Mike Picc
Company: Picosawesome
Email address: picciotti93@gmail.com
Sent on: Saturday, May 12 2012 at 2:10 AM EDT

Date/Time: Jan.11 2018 4:11PM

| File No. | Mode | Destination | Pg(s) | Result | Page Not Sent |
|---|---|---|---|---|---|
| 0288 | Memory TX | fantasy2 | P. 1 | E-3(3) | P. 1 |

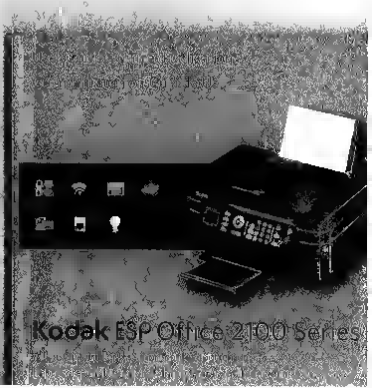
---

Reasons for error
E.1) Hung up or line fail
E.2) No answer
E.3) Exceeded max. E-mail size
E.4) Memory
E.5) Non-facsimile connection
E.6) Destination not done not transmit IP-Fax



TEST

Test test


Kodak ESP Office 2100 Series

FAX

TEST

3-23-09

CHEFKOCH.DE

# Blumenkohl-Käse Suppe nach Odinette

**leckere, fettreduzierte Suppe**

Den Blumenkohl waschen und in kleine Röschen teilen, in kochendes Salzwasser geben und in 10-15 Minuten gar werden lassen.
In der Zwischenzeit das Hackfleisch mit der fein gewürfelten Zwiebel anbraten. Dann die Fleischbrühe zum Hackfleisch geben, den Schmelzkäse und die saure Sahne in der Suppe zergehen lassen und den Blumenkohl dazu geben; aufkochen lassen, mit Salz, Pfeffer und Muskat abschmecken und noch 10 Minuten ziehen lassen. Nach Geschmack und Saison zum Schluss frische Kräuter dazu geben (dann nicht mehr kochen, sonst werden sie grau).

| | |
|---|---|
| **Arbeitszeit:** | ca. 15 Min. |
| **Koch-/Backzeit:** | ca. 30 Min. |
| **Schwierigkeitsgrad:** | simpel |
| **Kalorien p. P.:** | keine Angabe |

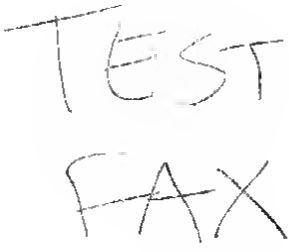
**Zutaten für 8 Portionen**

| | |
|---|---|
| 1 | Blumenkohl |
| 700 ml | Fleischbrühe |
| 400 g | Schmelzkäse, fettreduziert (2 Bl. a 200 g) |
| 1 Becher | saure Sahne, (200 g) |
| 500 g | Hackfleisch, gemischtes |
| 1 | Zwiebel(n) |
| | Kräuter, frische |
| | Salz und Pfeffer |
| | Muskat |

**Variation:** Odinette

| ◂ No. ▸ | ◂ Name ▸ | ◂ Value ▸ |
|---|---|---|
| 7801-01 | Total Operation | Total Operation | 9366 |
| 7401-01 | Total SC Counter | | 11 |
| 7403-01 | SC History | Jul 31 08:00:10 2017 | 552 | 72725 |
| -02 | | Jul 13 09:58:06 2011 | 000 | 72739 |
| -03 | | Jul 11 12:23:11 2011 | 010 | 72126 |
| -04 | | Apr 08 11:43:11 2011 | 000 | 73266 |
| -05 | | Dec 19 09:41:48 2018 | 010 | 11701 |
| -06 | | Nov 2 10:05:22 2018 | 010 | 11613 |
| -07 | | Sep 30 10:11:18 2018 | 010 | 11500 |
| -08 | | Jun 12 12:54:00 2018 | 010 | 11392 |
| -09 | | May 29 03:19:48 2018 | 000 | 00163 |
| -10 | | Mar 29 09:39:01 2018 | 010 | 00072 |
| 7502-01 | Counter-Paper Ja | | | 131 |
| 7803-01 | Counter-Orgn Ja | | | 000 |
| 7504-01 | Paper Jam Loc | At Power On | | 20 |
| -10 | | Regist. No/Feed OFF | | 00 |
| -11 | | 1 Vertic. SN OFF | | 0 |
| -19 | | 1 Vertic. SN ON | | 0 |
| -21 | | 2 Vertic. SN OFF | | 0 |
| -29 | | 2 Vertic. SN ON | | 0 |
| -30 | | Regist. Bypass OFF | | 1 |
| -39 | | Regist. Bypass ON | | 4 |
| -70 | | Regist. SN OFF | | 0 |
| -79 | | Regist. SN ON | | 0 |
| -120 | | Exit SN OFF | | 0 |
| -121 | | Exit SN ON | | 24 |
| -122 | | Duplex SN OFF | | 30 |
| -129 | | Duplex Inverter OFF | | 10 |
| -130 | | Duplex Inverter ON | | 0 |
| 7505-01 | Original Jam Loc | At Power On | | 201 |
| -210 | | Regist. SN OFF | | 00 |
| -211 | | Regist. SN ON | | 174 |
| -219 | | Paper Exit SN OFF | | 01 |
| -219 | | Paper Exit SN ON | | 10 |
| -314 | | Inverter SN #1 | | 10 |
| -315 | | Inverter SN | | 0 |
| 7506-05 | Paper Jam Loc | All LEF | | 0 |
| -44 | | MLT LEF | | 0 |
| -139 | | All SEF | | 0 |
| -194 | | All SEF | | 0 |
| -142 | | MLT SEF | | 0 |
| -194 | | LU SEF | | 0 |
| -199 | | LT SEF | | 101 |
| -172 | | HLT SEF | | 0 |
| -209 | | Other | | 0 |
| 7507-01 | Duplex Jam Loc | At Power On | 11:28:13 2011 | 1EB | 72736 |
| -02 | | Apr 11 09:02:56 2011 | 121 | 72356 |
| -03 | | Apr 10 18:36:12 2017 | 122 | 72360 |
| -04 | | Apr 01 06:21:18 2011 | 122 | 72336 |
| -05 | | Mar 14 18:35:48 2011 | 348 | 72193 |
| -06 | | Mar 08 18:08:15 2011 | 015 | 12173 |
| -07 | | Dec 11 13:46:12 2018 | 101 | 71781 |
| -08 | | Dec 06 14:26:05 2018 | 121 | 11868 |
| -09 | | Nov 28 12:11:54 2018 | 122 | 11600 |
| -10 | | Nov 18 10:18:07 2018 | 121 | 71310 |
| 7508-01 | Duplex Jam Loc | Jun 28 11:54:24 2017 | 011 | 72897 |
| -02 | | May 24 07:52:28 2011 | 012 | 72486 |
| -03 | | May 19 18:12:06 2011 | 210 | 72473 |
| -04 | | May 11 10:48:52 2011 | 212 | 72443 |
| -05 | | Apr 14 18:56:11 2011 | 212 | 72316 |
| -06 | | Mar 31 14:29:18 2011 | 210 | 72310 |

| ◂ No. ▸ | ◂ Name ▸ | ◂ Value ▸ |
|---|---|---|
| 7509-07 | Supply Jam Loc | 1st 28 12:48:46 2011 | 011 | 72386 |
| -08 | | Feb 21 11:58:26 2011 | 210 | 72053 |
| -09 | | Dec 18 18:42:33 2018 | 210 | 71100 |
| -10 | | Nov 22 18:58:36 2018 | 210 | 11660 |
| 7804-01 | Part Replacement | PCU | | 1 |
| 7805-0 | PM Counter | Paper | | 73811 |
| 7825-01 | MF Error Counte | Error Tota | | 0 |
| -02 | | Error Resets | | 0 |
| 7826-01 | Resident Memory | | | 000 |
| 7901-01 | Export Info | File Name | | 0000 (date_proc) |
| -02 | | Number of Lines | | 4000 |
| -03 | | Location | | 12 |
| 7910-01 | Error Hs | System/Copy | | D0875B300 |
| -02 | | Engine | | D0875B400 |
| -10 | | FRU | | D0888870C |
| -10 | | NIB | | D0814629C |
| -20 | | HDD Format Code | | No String |
| -152 | | NetWare | | No String |
| -100 | | APCS | | D4855526 |
| -101 | | PS | | D4855105C |
| -102 | | PCL | | D4858858C |
| -103 | | PCLXL | | D4858828C |
| -104 | | PDF | | D4860105C |
| -105 | | PJL | | No String |
| -106 | | PRNT | | D4855527 |
| -107 | | PRNT1 | | D4855526 |
| -108 | | PRNT2 | | D4855818 |
| -109 | | PRNT3 | | D4855526 |
| -200 | | Battery | | No String |
| -201 | | Copy | | |
| -202 | | Net 1 fa | | D0875B438 |
| -203 | | Fax | | D0875B688 |
| -204 | | Printer | | D4855455C |
| -205 | | Scanner | | D4859878C |
| -206 | | RFax | | D0875B21C |
| -208 | | MIB | | No String |
| -241 | | WebSystem | | D0875B32C |
| -242 | | WebCopy | | D0875B29C |
| -243 | | WEX1 | | No String |
| -244 | | WEX2 | | No String |
| -245 | | WEX3 | | No String |
| 7811-01 | Firmware Version | System/Copy | | 1.01 |
| -02 | | Engine | | 1.01.04 |
| -10 | | ECU | | 00.00.00 |
| -15 | | NIB | | 0.00 |
| -20 | | HDD Format Code | | No String |
| -152 | | NetWare | | No String |
| -100 | | APCS | | 0.01 |
| -101 | | PS | | 1.01 |
| -102 | | PCL | | 1.02 |
| -103 | | PCLXL | | 1.02 |
| -104 | | PDF | | 1.01 |
| -105 | | PJL | | 1.06 |
| -106 | | PRNT | | 1.06 |
| -107 | | PRNT1 | | 1.04 |
| -108 | | PRNT2 | | 1.06 |
| -109 | | PRNT3 | | No String |
| -200 | | Battery | | No String |
| -201 | | Copy | | 01.01 |
| -202 | | Net File | | 1.01 |


TEST
FAX

TECHNOLOGY
CENTER
24675 Lahser Road
Southfield, MI 48033
248-746-0248 – phone
248-746-4351 – fax

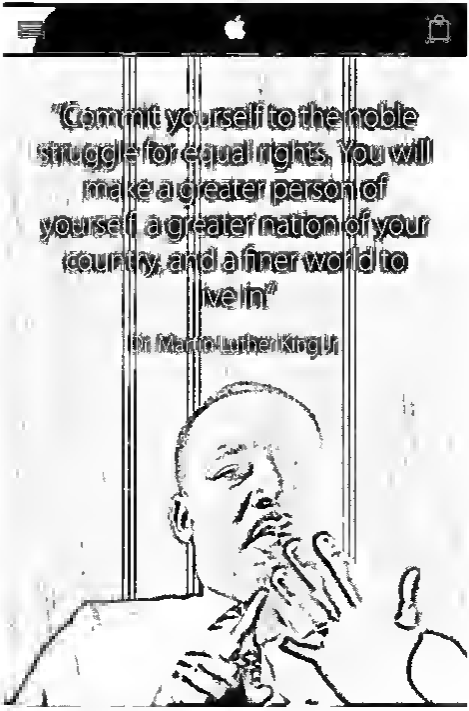
# FAX COVER SHEET

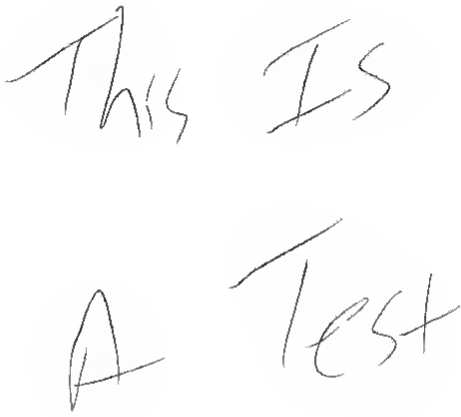
To: Tech Dept

Please Send a Fax
back to 248-746-3704

Number of Pages 1 (including cover page)

●●○○○ T-Mobile 3:01 PM 61%
apple.com




This Is
A Test

# Fax Transmission

| | |
|---|---|
| **To.** | **From** ABI Academic |
| **Fax.** 18553301239 | **Date** 3/14/2018 1 53 49 PM PDT |
| **RE:** | **Pages.** 1 |

Comments.

# Google

[redacted]

[redacted]

Customer service: 00 1 650 [redacted] 0000

Stock price: [redacted]

[redacted]

Founders: [redacted]

Headquarters: [redacted]

CEO: [redacted]

Founded: [redacted]

## Recent news

[redacted]

This is a test fax
Please ignore

## Getting Help from Canon

### Email Tech Support — www.usa.canon.com/support

Please note: from there you will need to select your product, then click on the "Support by Email" link under Service & Support.

### Toll-Free Tech Support— 1-800-OK-CANON

This option provides live telephone technical support, free of service charges, Monday-Friday (excluding holidays), **during the warranty period.** Telephone Device for the Deaf (TDD) support is available at 1-866-251-3752.

## Ordering Information

The following ink tanks are compatible with this machine.

| | Order # |
|---|---|
| CLI-226BK | 4546B001 |
| CLI-226M | 4548B001 |
| CLI-226C | 4547B001 |
| PGI-225PGBK | 4530B001 |
| CLI-226Y | 4549B001 |

Call **1-800-OK-CANON** to locate a dealer near you, or visit the Canon online store at www.shop.usa.canon.com


CANON U.S.A. INC
One Canon Plaza, Lake Success, NY 11042 U.S.A.
www.usa.canon.com


## Ayuda de Canon

### Soporte técnico por correo electrónico — www.usa.canon.com/support

Tenga en cuenta que desde esa página, tendrá que seleccionar el producto y a continuación hacer clic en el vínculo "Support by Email" situado bajo Service & Support.

### Soporte técnico telefónico gratuito 1-800-OK-CANON

Esta opción proporciona soporte técnico telefónico, libre de cargos, de lunes a viernes (excepto festivos), **durante el período de garantía.** El soporte mediante dispositivo telefónico para personas con discapacidad auditiva (TDD) está disponible en 1-866-251-3752.

## Información de pedidos

Los depósitos de tinta siguientes son compatibles con este equipo.

| | N.º de referencia |
|---|---|
| CLI-226BK | 4546B001 |
| CLI-226M | 4548B001 |
| CLI-226C | 4547B001 |
| PGI-225PGBK | 4530B001 |
| CLI-226Y | 4549B001 |

Llame a **1-800-OK-CANON** para localizar un distribuidor cercano o visite la tienda en línea Canon en www.shop.usa.canon.com


QT5-3956-V01 1128/0FS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PRINTED IN THAILAND

FARLEY

# Test Fax #

١٤٥٧

٢٠٠٩

FAX

Effective Date:_____

Expiration Date, if any _____

☐ Check box if no expiretion

# DO NOT RESUSCITATE ORDER

Patient's full name _____

In the event of cardiac and/or pulmonary arrest of the patient, efforts at cardiopulmonary resuscitation of the patient SHOULD NOT be initiated. This order does not affect other medically indicated and comfort care.

I have documented the basis for this order and the consent required by the NC General Statute 90-21.17(b) in the patient's record.

Signature of Attending Physician

Printed Name of Attending Physician

Address

City, State, Zip

Telephone Number (office)

Telephone Number (home)

**Do Not Copy** **Do Not Alter**

Interpage

Phone +1 (650) 331 2900 • Fax +1 [illegible] • www.interpage.net

Fax Cover Sheet

Date	Tue Mar 10 13:24:[illegible]
Pages	3 including the cover page
To	
From	Interpage Test Fax
Re	

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[illegible]

Attn: Test

To: Fairley

# POISON

Te

F

FAX JOURNAL REPORT

TIME : 12/14/2011 14:26
NAME :
FAX :
TEL :
SER.# : G8N494765

| NO. | DATE | TIME | FAX NO /NAME | DURATION | PAGE(S) | RESULT | COMMENT |
|---|---|---|---|---|---|---|---|
| #001 | 11/17 | 14:51 | 3852651698 | 3" | 01 | OK | TX ECM |
| #002 | 11/21 | 11:54 | 3455524811 | 14 | 01 | OK | TX ECM |
| #003 | 11/21 | 12:01 | 3455524811 | 22 | 01 | OK | TX ECM |
| #004 | 11/22 | 14:17 | 19547226444 | 42 | 00 | BUSY | TX |
| #005 | 12/09 | 09:11 | 5153979562 | 41 | 01 | OK | RX |
| #006 | 12/14 | 14:22 | 3856372695 | 26 | 01 | OK | TX ECM |

BUSY BUSY/NO RESPONSE
NG POOR LINE CONDITION / OUT OF MEMORY
CV COVERPAGE
POL POLLING
RET RETRIEVAL
PC PC-FAX

It's 2018

and I am

still troubleshooting

faxes

I Told you
The Bastard
works

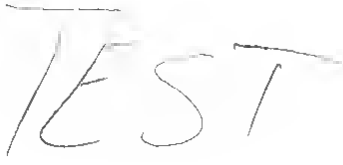
FAX TEST 11/10/16

06/22/2012

TEST FAX

FROM: TAMMY WINIECKI – ext: 7071

Please email me to let me know if you received this fax.

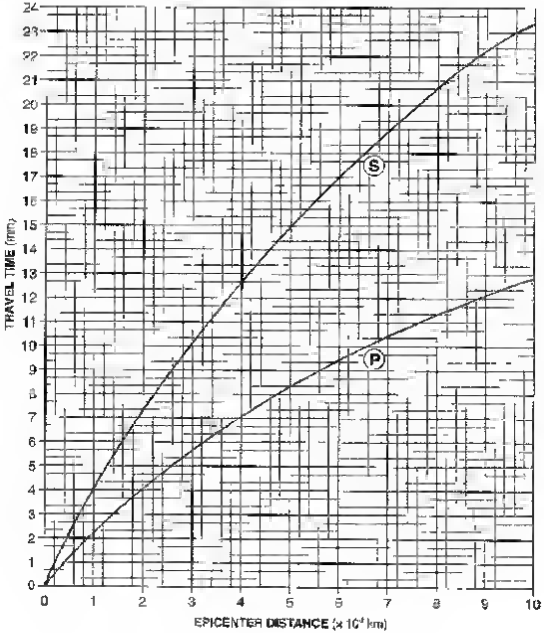

TEST

888 877-1655

```
test modem passthrough sccp fax

modem passthrough fax end to end
```

## Earthquake P-Wave and S-Wave Travel Time



# Lexmark X364dn (Page 2)

**Network/Port(Conc.)**

**Network Address**

| | |
|---|---|
| USB | = 001b7580566 |
| LAA | = 000000000000 |
| End-of Job Timeout | = 90 |
| Banner Page | = Off |

**TCP/IP**

| | |
|---|---|
| Activate | = On |
| View Hostname | = E3B001875B0566 |
| IP Address | = 10.217.62.201 |
| Netmask | = 255.255.252.0 |
| Gateway | = 10.217.64.2 |
| Enable DHCP | = On |
| Enable AutoIP | = Yes |
| Enable FTP/TFTP | = Yes |
| Enable HTTP Server | = Yes |
| WINS Server Address | = 165.130.218.65 |
| Enable DDNS | = Yes |
| Enable DDNS | = Yes |
| DNS Server Address | = 10.217.64.1 |

**IPv6**

| | |
|---|---|
| Enable IPv6 | = Off |
| Auto Configure On | = On |
| View Hostname | = E3B001b7580566 |
| View Add dess | = :: |
| View Router Address | = :: |
| Enable DHCPv6 | = On |

**AppleTalk**

| | |
|---|---|
| Activate | = No |
| View Name | = E3B001B7580566 Lexmar<br>k X364dn(Local Area Network-<br>1 |
| View Address | = 0.0 |
| Set Zone | = |

**HTTP Menu**

| | |
|---|---|
| PC SmartSwitch | = On |
| PS SmartSwitch | = On |
| NPA Mode | = Auto |
| USB Buffer | = Auto |
| Net 0 Buffer | = Auto |

**Settings**

**General Settings**

| | |
|---|---|
| Display Language | = English |
| Eco-Mode | = Off |
| Quiet Mode | = Off |
| Run Initial Setup | = Off |
| Paper Sizes | = US |
| Scan to PC Port Range | = 9751 32880 |
| Default Name | = rax |
| Date Format | = MM-DD-YYYY |
| Time Format | = 12 hour A.M /P.M |

**Alarms**

| | |
|---|---|
| Alarm Control | = Single |
| Cartridge Alarm | = Off |

**Timeouts**

| | |
|---|---|
| Power Saver | = 30 |
| Screen Timeout | = 15 |
| Print Timeout | = 30 |
| Wait Timeout | = 40 |

**Print Recovery**

| | |
|---|---|
| Auto Continue | = 0 |
| Jam Recovery | = Auto |
| Page Protect | = Off |
| Factory Defaults | = Do Not Restore |

**Settings(Conc.)**

**Copy Settings**

| | |
|---|---|
| Content | = Text |
| Sides (Duplex) | = 1 To 1 Sided |
| Paper Saver | = Off |
| Print Page Borders | = Off |
| Collate | = On (1,2 1,2 1,2) |
| Original Size | = Letter |
| Paper Source | = Tray 1 |
| Transparency Separators | = On |
| Separator Sheets | = None |
| Separator Source | = Tray 1 |
| Darkness | = ____ |
| Number of Copies | = 1 |
| Overlay | = Off |
| Alias or Unity Copies | = On |
| Background Removal | = 0 |
| Contrast | = 0 |
| Shadow Detail | = 0 |
| Sharpness | = 3 |
| Scan edge to edge | = Off |

**Fax Settings**

**General Fax Settings**

| | |
|---|---|
| Station Name | = 1727 EXPSTR/PWRSA<br>IES |
| Station Number | = 8785967908 |
| Station ID | = 0 Station Name |
| Enable Manual Fax | = On |
| Memory Use | = Equal |
| Cancel Faxes | = Allow |

**Fax Send Settings**

| | |
|---|---|
| Resolution | = Standard |
| Original Size | = Mixed Letter/Legal |
| Sides (Duplex) | = Off |
| Content | = Text |
| Darkness | = ____ |
| Dial Mode | = |
| Automatic Redial | = 5 |
| Redial Frequency | = 3 |
| Behind a PABX | = Off |
| Send a EOM | = On |
| Send a Tone Beore | = On |
| Driver to Tax | = On |
| Dial Mode | = Tone |
| Max Speed | = 33600 |
| Background Removal | = 0 |
| Contrast | = Best for content |
| Shadow Detail | = 0 |
| Scan edge to edge | = Off |
| Sharpness | = 3 |

**Fax Receive Settings**

| | |
|---|---|
| Erase o Tax Receive | = On |
| Rings to Answer | = 1 |
| Auto Answer | = On |
| Manual Answer Code | = #99 |
| Auto Reduction | = On |
| Paper Source | = Auto |
| Sides (Duplex) | = Off |
| Fax Footer | = On |
| Max Speed | = 33600 |
| Block No Name Fax | = Off |

**Fax Log Settings**

| | |
|---|---|
| Transmission log | = Print log |
| Receive Error Log | = Print on Error |
| Auto Print Logs | = On |
| Log Paper Source | = Tray 1 |
| Logs Display | = Network Station On<br>ne |
| Enable Job Log | = On |
| Enable Call Log | = On |

AH-F

68-596 8908

countries to take in refugees.

Though Syrians can now spend long periods massed on the border awaiting entry, in October the Turkish official assured me that regardless of the number of Syrians who arrive, they will be welcome. "We're not going to kick them out," he said. "It's a global responsibility. Even if the war ends tomorrow, they'll stay two or three more years because there's no infrastructure at home. We're prepared for them to stay for a long time."

Kirisci, who co-wrote a report on the camps late last year, agrees that it's unlikely the Turks will eject the Syrians or start treating them less hospitably. The Istanbul governor was trying to move urban refugees into camps. But even in the winter cold, they didn't want to go. After they were forced into one, they kept returning to their spots on the streets. "The refugees are recognizing that they are there to stay and don't want to risk living open-ended in camp," Kirisci says. "They'd rather risk living in the wild."

Mac McClelland is the author of "For Us Surrender Is Out of the Question: A Story From Burma's Never-Ending War." She is working on a book about PTSD.

Editor: Sheila Glaser

A version of this article appears in print on February 16, 2014, on page MM24 of the Sunday Magazine with the headline: Container City.

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PAGE

3

of

3

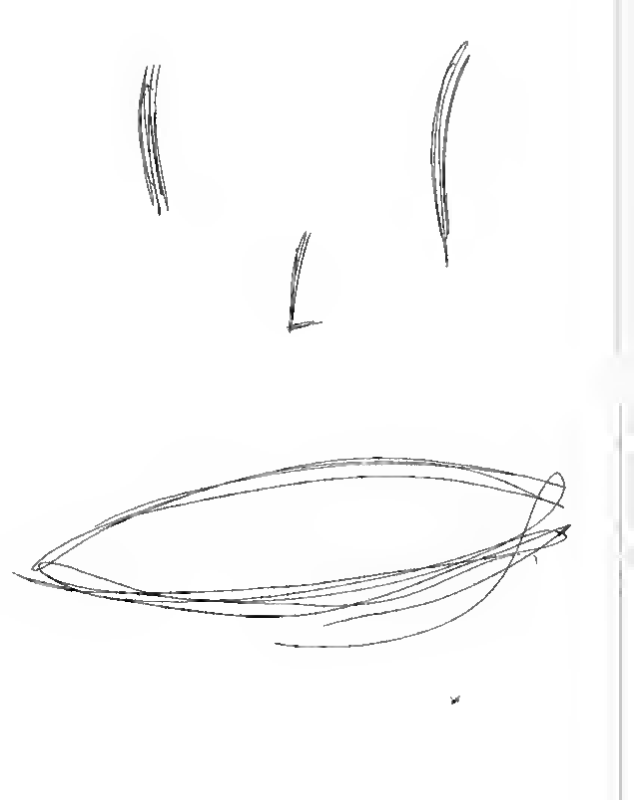
Test Fax

Test

TESTING

FAX

MACHINE



TEST

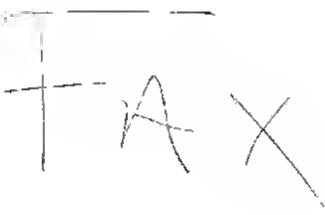
FAX

from

855-330-1039

Test Fax from Westley

TEST


TAX

**DUMMY FAX DOCUMENT**

**NO CONTENT HERE**

Making benefits easier

for you to enroll to manage, to get help

## Flexible Spending Account (FSA)
## Child Dependent Care (CDC) & Dental Vision Medical (DVM) Claim Tips

Last Updated: January 2011

**Submitting a Claim**

Please use the following claims process to file with US Benefits Service.

- Complete the correct Spending Account Reimbursement Form – Child Dependent Care (CDC) or Dental/Vision/Medical (DVM). Both are available on Benefits Online.
- Although the form is a .pdf. It can be edited and saved. You do not have to handwrite claims. See additional tips below for completing the form
- There are two ways to submit your claim
  - *Fax:* 877-214-5051
  - *Mail:*
    ACS Spending Accounts
    PO Box #81121
    El Paso, TX 79998-1121

For Dental/Medical/Vision (DVM) you must submit the following each time you request reimbursement.

- Completed Health Care (DVM) Reimbursement Form
  - Dates of Service
  - Amount of Service
  - Dependent Name and Date of Birth
- Copy of Explanation of Benefits (EOB) or itemized receipt* including
  - Name of patient
  - Name and address of the provider
  - Description of the service
  - Date of service

*Note – please see the form for additional details regarding the use of EOB or itemized receipts

For Child Dependent Care (CDC) you must submit the following each time you request reimbursement:

- Child Care Dates of Service
- Amount of Service
- Dependent Name and Date of Birth
- Social Security# or Tax ID# of Caregiver

Please attach the receipt or bill from your service provider to the form. Cancelled checks or balance due statements are not acceptable. Receipts will not be returned, so please retain copies for your records.

gbs

Test

# Buckwheat Zydeco

From Wikipedia, the free encyclopedia

**Buckwheat Zydeco** is the stage name of **Stanley Dural, Jr.** (born November 14, 1947) an American accordionist and zydeco musician. He is one of the few zydeco artists to achieve mainstream success. His music group is formally billed as **Buckwheat Zydeco and Ils Son Partis Band**, but often they perform as merely *Buckwheat Zydeco*.

The *New York Times* says "Stanley 'Buckwheat' Dural leads one of the best bands in America. A down-home and high-powered celebration...meaty and muscular with a fine-tuned sense of dynamics... propulsive rhythms... incendiary performances."[1] *USA Today* calls him "a zydeco trailblazer."[2]

Buckwheat Zydeco has performed with a large number of famous musicians from Eric Clapton (with whom Buckwheat also recorded) and U2 to The Boston Pops. The band performed at the closing ceremonies of the 1996 Summer Olympics to a worldwide audience of three billion people. Buckwheat performed for President Clinton twice, celebrating both of his inaugurations. The band has appeared on the *Late Show with David Letterman*, *CNN: The Today Show*, *MTV*, *NBC News*, *CBS Morning News*, National Public Radio's *Weekend Edition*

**Buckwheat Zydeco**

Buckwheat Zydeco playing on the main stage at the 2006 Festival International de Louisiane

**Background information**

| | |
|---|---|
| **Birth name** | Stanley Dural Jr. |
| **Also known as** | Buckwheat Zydeco |
| **Born** | November 14, 1947<br>Lafayette, Louisiana |
| **Genres** | Zydeco, R&B, Country |
| **Instruments** | Vocals, accordion |
| **Years active** | 1971— |
| **Labels** | Alligator Records, Tomorrow Recordings, Roundeo, Island |
| **Website** | www.buckwheatzydeco.com (http://www.buckwheatzydeco.com) |

## Contents


- 1 Early life
- 2 Career
- 3 Discography
- 4 Music videos
- 5 See also
- 6 References

=== COVER PAGE ===

TO: _____

FROM: ALEX BLACK

FAX: 2504937134

TEL: 2504937134

COMMENT:

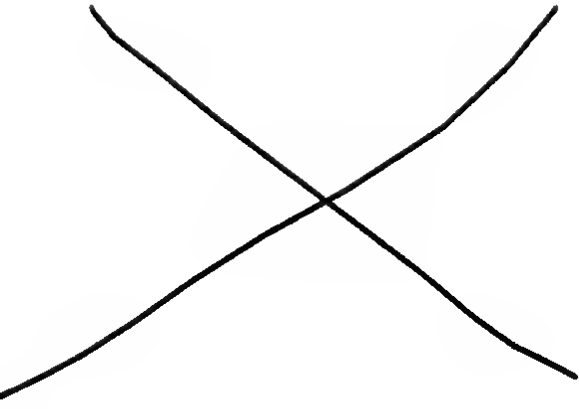
Liam:
You're insecure
Don't know what for
You're turning heads when you walk through the door
Don't need make up
To cover up
Being the way that you are is enough

Harry:
Everyone else in the room can see it
Everyone else but you-ou-ou

Chorus
Baby you light up my world like nobody else
The way you toss your hair gets me overwhelmed
But when you smile at the ground it ain't hard to tell
You don't know (oh oh)
You don't know you're beautiful
If only you saw what I can see
You'll understand why I want you so desperately
Right now I'm looking at you and I can't believe
You don't know (oh oh)
You don't know you're beautiful
(Oh oh)
That's what makes you beautiful

Zayn:
So c-come on
You got it wrong
To prove I'm right I put it in a-a-e-ong
I don't why
You're being shy
And turn away when I look into your eye eye eyes

Harry:
Everyone else in the room can see it
Everyone else but you
[ lyrics from http://www.lyricsfreak.com/o/one+direction/what+makes+you+beautiful_20979473.html
]
Chorus.
Baby you light up my world like nobody else
The way that you flip your hair gets me overwhelmed
But when you smile at the ground it ain't hard to tell
You don't know (oh oh)
You don't know you're beautiful
If only you saw what I can see
You'll understand why I want you so desperately
Right now I'm looking at you and I can't believe



Bobby Trouble Sending Fax!

allows easy and sliding access to your camera to capture memories and take pictures effortlessly.
- Dual Purpose: Perfect Protection and Full Functionality for multi-use wallet features with ample storage for flipkard slots, photos, and money.
- Stylish original design and unique craftsmanship brings best of both worlds in protection and functionality

Compare with similar items

**New** (1) from $23.99 & FREE shipping.

**Sponsored products related to this item** (What's this?)

iPhone 8 Case, iPhone 7 Case, SHIELDON Genuine Leather iPhone 7 Wallet Case [Card S...
★★★★½ 157
$18.99 vprime

iPhone 8 Case, iPhone 7 Wallet Case, TUCCH Premium PU Leather Flip Folio Wallet Cas...
★★★★½ 97
$18.99 vprime

Silk iPhone 7/8 Wallet Case - VAULT Protective Credit Card Grip Cover Wallet Sla...
★★★★½ 2642
$14.99 vprime

iPhone 8 Case, iPhone 7 Case, ULAK Premium PU Leather iPhone 8 Wallet Case with Kic...
★★★★½ 118
$8.99 vprime

iPhone 6S Case, Shift Leather Wa... Book Desig...
★★★★☆
$24.99 vp...
No feedback

**Customers who viewed this item also viewed**

TUCCH iPhone 7 Wallet Case, iPhone 8 Case, Premium PU Leather Case with Card Slot, Stand
★★★★½ 140
$18.99 vprime

Genuine Leather Wallets for Men Women, G-CASE [Elegant] Slim Leather Multiple Card Slots Cash...
★★★★½ 32
$14.99 vprime

Ringke Flip Card Holder with Elastic Hand Strap Slim Soft Bumper Grip Fashion Multi-Card Slot
★★★★½ 229
$6.99 vprime

Ringke Flip Card Holder (3 Adhesive 3M (Grey) Premium Stick On Slim Fashion Multi-Card Slot...
★★★★½ 288
$8.99 vprime

iPhone 8 Case, iPhone 7 Case, SHIELDON Genuine Leather iPhone 7 Wallet Case [Magnetic Closure],
★★★★½ 387
$18.99 vprime

**What other items do customers buy after viewing this item?**

# EGAMES PO RECEIVED COVER SHEET

**FAX NUMBER 213-365-4603**

**ATTENTION: AL LEON** **NUMBER OF PAGES:** 3

**STORE:** Santa Ana '06' **DATE FAXED:** 8-18-09

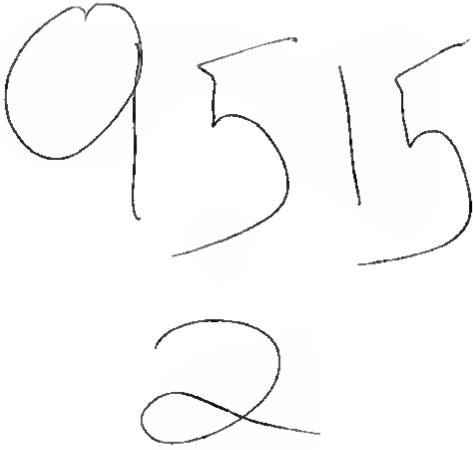
**PO NUMBER:** A9S6K-0 **VENDOR NAME.** Music Art Productions

**DATE PURCHASE ORDER WAS RECEIVED IN AR SYSTEM:** 8-18-09

**ASSOCIATE NAME:** Jorge Aguilera
PRINTED

**ASSOCIATE NAME:** Jorge Aguilera
SIGNATURE

****INCLUDE - ALL PO RECEIVING PAPERWORK- PO, RECEIVER, PACKING SLIP, BILL OF LADING**



# Windows XP Printer Test Page

Congratulations!

If you can read this information, you have correctly installed your Dell 2155cn Color MFP PCL6 on OPTI380SPARE

The information below describes your printer driver and port settings

| | |
|---|---|
| Submitted Time | 11 17 03 AM 4/18/2014 |
| Computer name | OPTI380SPARE |
| Printer name | M4_Dell_2135 |
| Printer model | Dell 2155cn Color MFP PCL6 |
| Color support | Yes |
| Port name(s) | NDWkPort00 |
| Data format | RAW |
| Driver name | dlxgizim.dll |
| Data file | dlxgizp1.ddd |
| Config file | dlxgizv.dll |
| Help file | dlxgiz.chm |
| Driver version | 32 A96 |
| Environment | Windows NT x86 |
| Monitor | Status Monitor Language Monitor for Dell 2155cn Color MFP PCL6 |
| Default datatype | RAW |

Additional files used by this driver

| | |
|---|---|
| C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\dlxgidm.dll | (2 3 4 0) |
| C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\dlxgizm_xrs | (2 3 4 0) |
| C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\dlxgmim.dll | (1 0 0 3) |
| C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\dlxjhm9.dll | (3 2 0 0) |
| C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\dlxlniz.dll | (1 0 0 6) |
| C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\dlxqnwd2.dll | (2 0 x 6) |
| C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\dlxqiar3.dll | (6, 2, 0, 0) |
| C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\dlxqnxa5.dll | (1 3 6 3) |
| C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\dlxgizl.cfg | |
| C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\dlxgiz2.cfg | |
| C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\dlxgiz_xrs (1, 0, 0, 1) | |
| C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\dlxgizl.cdd | |
| C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\dlxgiz2.cdd | |
| C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\dlxgizu2.ddd | |
| C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\dlxgizl1.exe | (2 000 2012 0806) |
| C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\dlxgizl.chl | |
| C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\dlxgiz2.chl | |
| C:\WINDOWS\System32\spool\DRIVERS\W32X86\3\dlxgizns.dll | (2 100 2009 1201) |

This is the end of the printer test page

# Detailed Stops and Mileage

For 11/17/2015 12:00:00 AM
Through 11/22/2015 11:59:00 PM (Central Time)

**Vehicle: Unit 10 Chevy 1500 Baggz**

| Date | Activity | Stop Time | Idle Time | Travel Time | Distance | Location |
|---|---|---|---|---|---|---|
| 11/17/2015 12:00:00 AM | Off | 57:56:16 | 0 | 0 | 0.00 | Closest Landmark: K&B Houston, Houston TX 77049 USA |
| 11/19/2015 10:04:07 AM | Off | 00:01:23 | 0 | 0 | 0.00 | Closest Landmark: K&B Houston, Houston TX 77049 USA |
| 11/19/2015 10:04:07 AM | Traveling | 0 | 0 | 0 | 0.00 | Closest Landmark: K&B Houston, Houston TX 77049 USA |
| 11/19/2015 10:11:08 AM | Off | 00:06:04 | 0 | 0 | 0.00 | Closest Landmark: K&B Houston, Houston TX 77049 USA |
| 11/19/2015 10:23:33 AM | Traveling | 0 | 0 | 00:02:28 | 0.00 | 7761 E Sam Houston Pky N/E, Belt Dr Houston, TX 77049 USA |
| 11/19/2015 10:26:46 AM | Off | 00:01:54 | 0 | 0 | 0.00 | 15143 Wallisville Rd/Overland Park Dr Houston, TX 77049 USA |
| 11/19/2015 10:30:18 AM | Off | 00:01:44 | 0 | 0 | 0.00 | 15145 Wallisville Rd/Overland Park Dr Houston, TX 77049 USA |
| 11/19/2015 10:35:04 AM | Off | 00:14:24 | 0 | 0 | 0.00 | 15137 Wallisville Rd/Overland Park Dr Houston, TX 77049 USA |
| 11/19/2015 10:50:30 AM | Off | 00:18:44 | 0 | 0 | 0.00 | 15139 Wallisville Rd/Overland Park Dr Houston, TX 77049 USA |
| 11/19/2015 11:14:15 AM | Traveling | 0 | 0 | 00:00:43 | 0.00 | 15899 Wallisville Rd/Carpenters Landing Way Houston, TX 77049 USA |
| 11/19/2015 11:14:58 AM | Off | 00:06:20 | 0 | 0 | 0.00 | 15970 Wallisville Rd/Hidden Park Houston, TX 77049 USA |
| 11/19/2015 11:22:02 AM | Off | 00:01:02 | 0 | 0 | 0.00 | 15970 Wallisville Rd/Hidden Park Houston, TX 77049 USA |
| 11/19/2015 11:28:54 AM | Off | 84:30:06 | 0 | 0 | 0.00 | Closest Landmark: K&B Houston, Houston TX 77049 USA |
| Totals: | | 145:10:00 | 09:00:00 | 00:03:11 | 0.00 | Activities: 10 |

| | | |
|---|---|---|
| | Rule 1 | Only complete coloured cells |
| | | Everything same as if it is negative adjustment<br>post as negative if it is positive adjustment input as positive |
| | Rule 2 | |
| Rule 3 | | Beer wastage has now been added<br>to reconcile |

January 12 2016

**INVENTORY RECONCILIATION WORKSHEET**

| | |
|---|---|
| **Total Bar Sales** | $481 75 |
| **vending machine sales** | $0 00 |
| **pool table sales** | $0 00 |
| **Music** | $0 00 |
| Inventory Adjustment | $0 00 |
| Less Waste | -$8 00 |
| **Adjusted Sales Total** | $452 75 |
| | |
| **Adjusted Sales Total** | $452 75 |
| **Add pull tab sales-coin bag** | $126.50 |
| Less Keno (2085 net) | -$118 60 |
| minus Pulltabs | -$26 00 |
| **Adjusted Net Sales Total** | $434 65 |
| | |
| **Less Interact** | -$54 51 |
| Less Supplies | -$46 35 |
| Less Total Tabs | $0 00 |
| | $0 00 |
| | $0 00 |
| | $0 00 |
| | $0 00 |
| | $0 00 |
| | $330 79 |
| | |
| Total Cash from Till | $284 65 |
| Less Reconciled Cash | -$330 79 |
| | |
| **cash slo draft** | -$46 14 |
| | |
| day close | $0 00 |
| night close | $0 00 |
| inventory | $0 00 |
| | $0 00 |

| | | |
|---|---|---|
| | Rule 1 | Only complete coloured cells |
| | Rule 2 | adjustment input as negative if it is |

**HOTEL & CONFERENCE RECONCILIATION**

| | | |
|---|---|---|
| Rooms-Cash | | $0 00 |
| Rooms-Credit | CPR Gerald Hallerman jan 5-12/16 | $490 42 |
| Rooms-Corporate Billing | | $0 00 |
| Other | | $0 00 |
| TOTAL | | $490 42 |

Paulo I

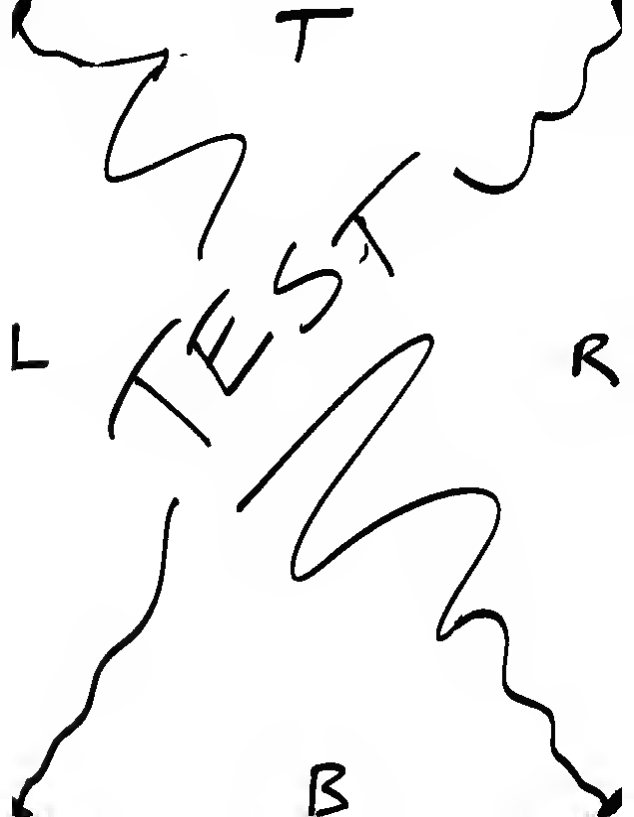
| | | | | | | |
|---|---|---|---|---|---|---|
| [redacted] | [redacted] | | | | | |
| [redacted] | [redacted] | | | | | |
| [redacted] | [redacted] | | | | | |

Counter

Serial No. L7765500470

Data of Today: Jun 19,2015 09:15 AM

| | |
|---|---|
| Total | 2831620 |


T
TEST
L
R
B

# God Bless You!
# This is the year of breakthrough!!!!!

FAX Press
or
FAX
1 855-330
1239

Twitter
Facebook
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Rebate Forms Careers About Us We Cover Site Map

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Known in Oregon & Parts of California as AMERICAS TIRE

test only ?

# [redacted] MUSEUM AT DEALEY PLAZA

e Sixth Floor Museum at Dealey Plaza
seum Store Order Form

der Date _
LL TO _____ SHIP TO _____
st Name _____ First Name: _____
st Name _____ Last Name: _____
ldress 1 _____ Address 1 _____
ldress 2 _____ Address 2 _____
y _____ City _____
Zip ST Zi
lephone _____ Telephone _____
mail _____ E mail

ORM OF PAYMENT WE DO NOT SHIP TO A P O BOX
Cash [] Check [] Money Order [] Resident of [] Business
ount Enclosed

isa []MC []Amex []Disc Credit Card # _ Exp Date

| m # | Description | Quantity | Price Each | Extended Amount |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Subtotal _
TX Residents add 8.25% tax _____
Shipping _
Total _

pping is estimated at $ [redacted]
pping. Shipping totals w [redacted]

10 Free Street, 2nd Floor
Portland, ME 04101
Phone 207-874-6524
Fax 207-874-6527

1233 20th Street NW Suite 303
Washington DC 20036
Phone 202-903-8101
Fax 202-903 2790

info@nashp.org
www.nashp.org

| | | | |
|---|---|---|---|
| To: | Sandy Oberzeit | From | Cindy O'Connell |
| Fax | 855-330-1239 | Pages: | |
| Phone | | Date | 2/5/16 |
| Re | Test | cc | |

Comments

Test

# Facsimile

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www.support.dell.com

DELL

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**Call now while equipment is nearby & get a 10% Discount**

To be removed from our fax list, please call toll free 1-877-281-6542 & enter pin# 5001. Thank you

Test fax from Circuit ID

# PRIVILEGED & CONFIDENTIAL

To Fax Toy

From Stro

Number of Pages 1

**If you're not the person named above, you've read too much already. Just hand this entire fax to its intended recipient and nobody'll get hurt.**

**Test Test Test Test Test Test Test Test**

©1994 by CarlSirrow Press. Download this fax cover sheet and more from www.FreePrintable.net.

Test J

*98 P 1-888-877-1655

power

TEST

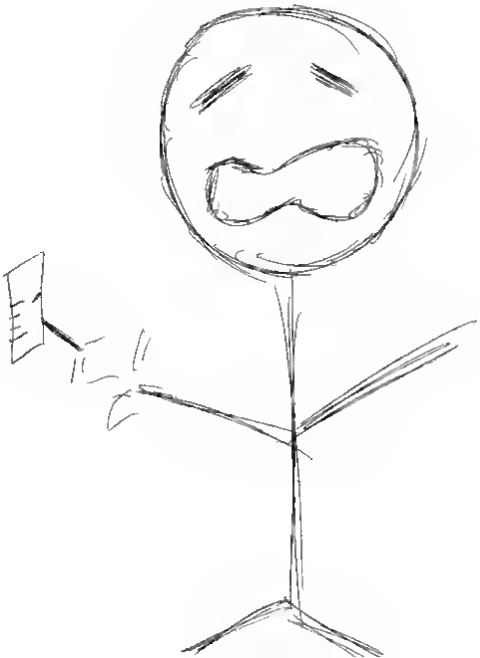
DZ

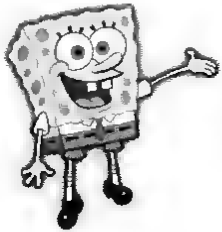
7-30-11

But that was a long time ago and it was just that one day.

# THE END.

**********
This communication and any files or attachments transmitted with it may contain information that is confidential privileged and exempt from disclosure under applicable law. It is intended solely for the use of the individual or the entity to which it is addressed. If you are not the intended recipient, you are hereby notified that any use, dissemination, or copying of this communication is prohibited by federal law. If you have received this communication in error, please destroy it and notify the sender.
**********





1-55-330-1279

Thanks!

# Third Party Test Fax

| To: | From: |
|---|---|
| Fax: | Email: |
| Phone: | Date: |
| Subject: Test Fax | |

## Fax Settings

Reference your Owner's Manual for help adjusting the settings below

- ECM (error correction mode) Off
- Baud Rate 9600
- International On (the is set on a per-call basis)
- Resolution Standard
- Answer Mode Fax Only
- Rings to Answer Zero (0)
- Call Waiting Off
- Bandwidth Saver High (90 kbps)
- Distinctive Ring Off

## Troubleshooting Steps

The steps below will help you resolve common faxing problems

- Switch off fax machine and unplug power adaptor from device and from wall outlet
- Let fax machine remain off for 60 seconds
- Try a different phone cord between the fax machine and the Vonage device
- Eliminate any splitters between the fax machine and the Vonage device

## Further Assistance

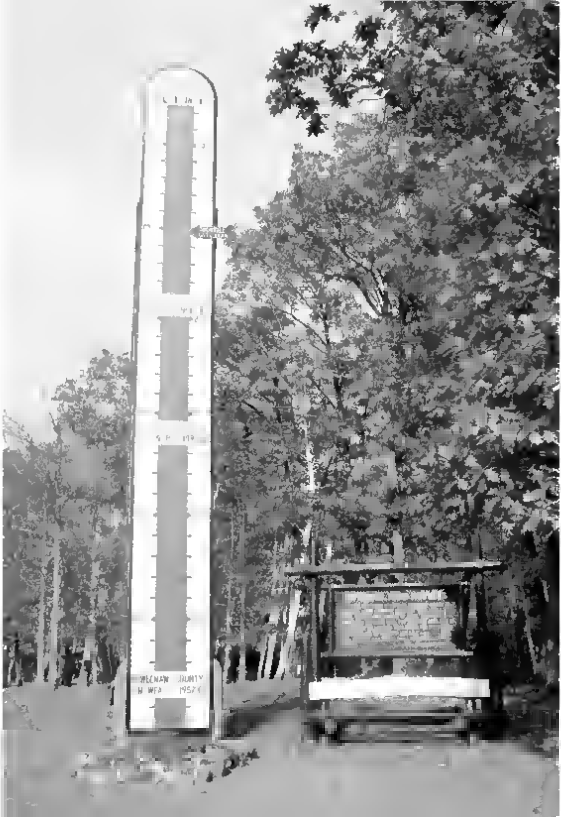
If you need further assistance using your XXXXXXX Fax Service we are always available to help

Call us at 1 234-567 8901 (1 234-567 8901) or visit www website.com

test 1-7-14 test
1

Life fax test

Elon Office



test

Lorem ipsum

LTN
Law Technology News

## President's Corner

Nexidia (www.nexidia.com) has upgraded its audio review software, **AudioFinder 3** a desktop-based program, includes enhanced Search by Example that helps users locate individual words or phrases within an audio file, says Nexidia president and CEO John Willcutts.

Reviewers can annotate and share the results of their investigations. Users also can save, export, and play audio outside of the software.

Language ID automatically detects what language are being spoken, and flags each file accordingly he says.

Products, Systems & Services for Legal Professionals www.lawtechnologynews.com September 2010 Vol. 17 No. 9 Price $20.00

RISK MANAGEMENT

# Safe Sky

**By Patrick Oot**

You just found out that your client's business unit has launched a press release announcing that the corporation is now moving collaboration and electronic messaging functions to Google Apps.

Unfortunately this notice is the network access to a shared pool of configurable computing resources. If you think of computing power this way city dwellers are embracing Zipcar you'll have a basic understanding of how it works you pay only for the computing power you need. The main driver for cloud migration is

[redacted]

[redacted]

[redacted]

Education
Éducation

PDF Test File

For installations, your computer is equipped with a PDF (Portable Document Format) reader. You should be able to view any of the PDF documents and forms available on our site. PDF forms are indicated by these icons or

Yukon Department of Education
Box 2703
Whitehorse Yukon
Canada
Y1A 2C6

Please visit our website at http://www.education.gov.yk.ca/

## Volunteer Descriptions

**Fundraising**

- **School Auction.** Ideal for event coordinators and party planners with talents in location, menu and theme selection culminating in a memorable fundraising night. Volunteers are needed for securing donat ons and day of event help: check in, check out, set up, clean up, etc
- **Dog Dash Planning.** Promote health and wellness with this family-oriented run/jog/walk fundraising event. help with advertising, set up, lap counting, water table, Popsicle table, clean up
- **Dog Dash Day Help.** Course set up, lap counting, water table, Popsicle table, clean up and cheering the kids on while they run!
- **Book Fair.** Encourage your child's love for reading by transforming the library into a bookstore, selling books and helping with book fair weekly events
- **Box Tops.** Secure donations for participant rewards and Box Top Shop supplies
- **Pioneer Pride Wear.** Help sell shirts and sweatshirts at events throughout the year.
- **Nugget/eScrip/SHOPAROO.** Ensure Pioneer families are aware and sign up! It's FREE!
- **Rosemary Wreath Sale.** Help create rosemary wreaths with the students to sell during the holidays to raise money for the garden program

**Enrichment**

- **Brave Music.** Share and open the world of music by conducting monthly lessons and all learning materials are provided through the school. No music knowledge necessary
- **Red Ribbon Week.** Help plan activities that spread awareness of positive and healthy choices.
- **Classroom Garden Program.** Nurture your child's love of nature and nutrition with hands on educational lessons. Easy to follow lessons provided. No gardening knowledge necessary. (For grades K-3.)
- **Active4Me/Bike to School.** Check-in students in the morning while encouraging active, safe and green transit. 8:00-8:40am
- **Student Play.** Support the arts with costumes, set design, and more! For grades 4-6.
- **Outreach.** Help plan and support some quick and fun events for students and parents.
- **Adopt A Family.** Help is needed for the program that gives to Pioneer families that are in need of a little extra support during the holidays. Help with collecting gifts, food and monetary donations.

**Teacher/School Staff Support**

- **Photocopying and library assistance.** This allows teachers to focus more on classroom instruction and lessons
- **Teacher luncheons.** Bring a dish or help set up during Conference Weeks & Teacher Appreciation Day Luncheon
- **Kinder Registration.** Help kinder parents register their new student to Pioneer. One day only on school grounds
- **Translation Help.** Assist school staff and teachers by communicating information to ESL students and their families

**Community Events**

- **Family Movie Night.** Help set up the movie screen on the grass, pop popcorn or bring a dessert
- **Fall Festival.** Help with planning and day of the event. Assist with the prize room, bake sale, Scare Crow Contest, Haunted House or a carnival activity booth.
- **Science Night.** Working with Exploit to organize a fun educational evening for Pioneer families
- **Pioneer Collector's Spring Fling.** Students bring their collections to school and share in the quad
- **Oscar Night.** Plan our first Oscar night party. Appetizers, drinks and prizes for Oscar ballot winners.

**Communications**

- **Classroom Representative.** You will receive important PTA communication throughout the school year and need to relay via email to fellow classroom parents. Assist with Teacher Appreciation Day and coordinate a holiday and/or end of the year gift for your child's teacher. Encourage parent participation in PTA events
- **Sign Making & School Kiosk.** Create eye-catching signs to promote PTA events and post signs in the school's kiosk
- **School Directory.** Compile, create or one of the [illegible]

TEXT

8-20-16

JUSTICE FOR
SETH
RICH

# FAX

**To:**

Company:
Fax: 1-213-294-2943
Phone:

**From:**

Fax: 404-890-5708
Phone: 6788346305
E-mail: Kenny_Olano@genpt.com

**NOTES:**

test gpc

**Date and time of transmission:** Sunday, March 20, 2016 5:41:50 AM
**Number of pages including this cover sheet:** 01

1-888-877-1655

THANK
YOU!

Information for Parents of Gifted Students

The Association for Bright Children of Ontario

Ottawa Chapter

# Parents Helping Parents: Demystifying the Gifted Program

**CONFUSED** about gifted education options in Ottawa Public schools?

**Need more information to make informed decisions?**

**Want an opportunity to speak with other parents who have "been there" ?**

Join ABC Ottawa and parents from various OCDSB gifted centres for an information evening where you can find answers to your questions.

- What does "gifted identification" mean?
- What does "placement" mean?
- What is an IPRC and an IEP?
- What are my child's placement options?
- What are the advantages and disadvantages of the different options?

The event will include informative speakers followed by an opportunity to speak with parents of students enrolled in the gifted program at schools across the city.

**Where:** McNabb Recreation Centre – Main Hall
180 Percy St, Ottawa

**When:** Wednesday, January 23, 2013

**Time:** 7:00 pm - 9:00 pm

Parents Helping Parents is presented as a free community service by ABC Ottawa

Web: http://www.abcontario.ca/ottawa
Email: ABCOttawa@abcontario.ca
Phone: (613) 860-1398

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TO you
FAX #
DATE

FROM ZOCO
FAX #

Memo:

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The Power of GoldFax

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# SHALLOW WATER SWIMBAIT TACTICS

What's better than catching those summer trout in shallow water? Ones summer is in full swing, I always find myself chasing trout that are ambushing prey from grass beds in shallow water. One problem I struggle with is finding the right bait for when that topwater bite turns off.

Even though I am comfortable throwing topwater all day, knowing I will only get a few blow-ups from big trout, it's nice to have something I will only get a few blow-ups from big trout, it's nice to find something they will hit a little more consistently after that oh-so-rewarding morning topwater bite.

There's nothing like working your tail off in that wonderful 100-degree summer weather. Yeah right, and the trout feel the same way. This time of year your best shot at getting some bigger trout on topwater is an hour before and after sunrise/sunset. During that magical hour nature rings the dinner bell, and if you are in the right spot, chances are you experience the bite that anywhere fishing has to offer. Unfortunately like most good things in life, it's usually over as soon as it starts. The trout will become less aggressive, and that topwater lure isn't as appealing to them as it was five seconds ago. It's frustrating. I know but there are options.

Every angler has their confidence lures they just know are going to catch fish no matter what. I grew up fishing MirrOlures, and they hold a special place in my heart. A chartreuse back chrome body 95mr He Dog pretty much stays on a Temple Fork Outfitters rod year round for me, but that He Dog runs in the most work during the summer. After the topwater bite turns off like a light switch, I usually switch to a 7M MirrOlure, or Catch 5. They are suspending MirrOlures perfect for shallow-water grass beds. But it's always nice to add something to the arsenal.

Even though I've found some great lures for when the topwater bite slows down, I'm always experimenting, trying to better myself as an angler and becoming more versatile. Lucky for me, I got a hold of the 4.5-inch Slow Sink Vudu Mullet by Jigner Baits. The capabilities of this bait are pretty much endless, but it's absolutely perfect for targeting bigger trout in shallow water. What's got me so worked up about this bait is the fact it gives you the option to present a large swimbait just above the grass beds in that 2- to 4-foot depth range. Since the lure sinks at an incredibly slow rate, you have the ability to give a dead slow presentation for those stubborn middle-of-the-day trout. A steady slow retrieve with just a few pauses every now and then has worked best for me. Those twitches will kill that Vudu like it owes them money, and the colors that have produced the most for me are Bamboo, Striped Mullet, and Gold Croaker. If you are in the market for a good summer lure, the 4.5" Vudu Mullet is a must have!



*For more solid fishing info, check out Kyle Johnson's website and blog at www.kylejohnsonfishing.com.*

For More Videos go to CAMINSHORE.COM

test

FAX

1843

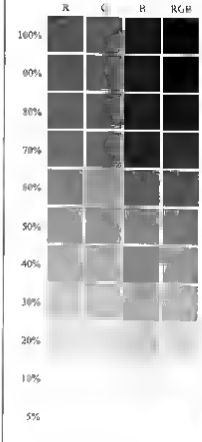
2

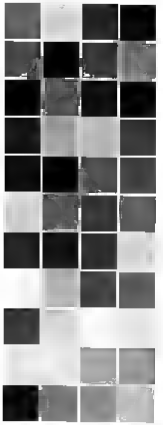
# This is what

boredom looks like

Alot of people can not believe that a boy can write this neat.

# Test Page



The quick brown fox jumps over the lazy dog.
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The quick brown fox jumps over the lazy dog.
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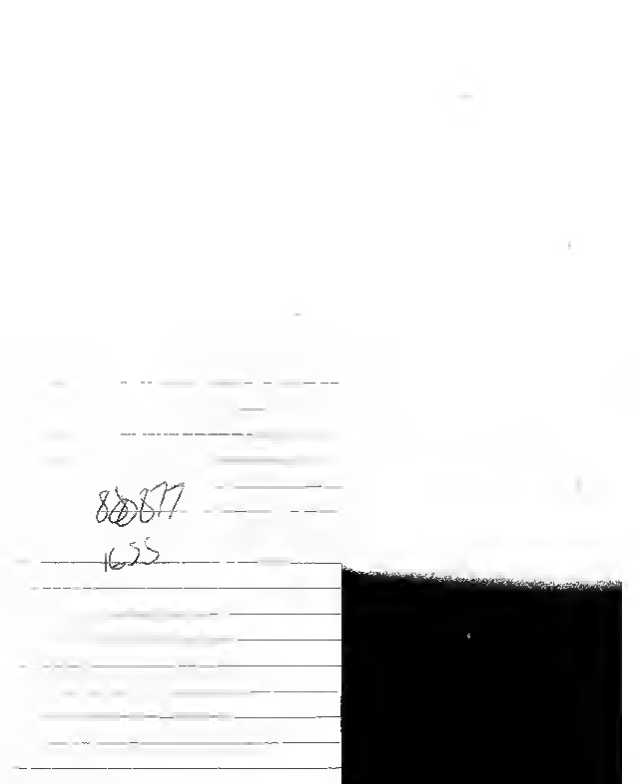
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# YOUR WINTER EVENT

January 24
at 5 P.M.
123 Main Street
Bothell, WA

# Transaction Dispute Form / Written Statement of Unauthorized Debit

## Section C – Dispute Reason

**Please read each of the following descriptions carefully and enter the number of the disputed transaction(s) from Section B in the box that pertains to the reason you are disputing that transaction**

Transaction number(s) from Section B. | Dispute Reason.

[ ] I have not authorized this charge to my card. I have not purchased or ordered merchandise in person, by phone, or by mail nor have I received any goods or services from this merchant

- My card was noticed missing/lost/compromised on __/__/__
- Did anyone else have access to your card or PIN? ☐ Yes ☐ No

If yes, please explain how _____

[ ] For ACH debits I (the undersigned) hereby attest that (i) I have reviewed the circumstances of the above electronic (ACH) debit to my account, (ii) the debit was not authorized, and (iii) the following, to the best of my ability to identify is the reason for that conclusion.

- ☐ I revoked the authorization I had given to the party to debit my account before the debit was initiated
- ☐ My account was debited before the date I authorized.
- ☐ My account was debited for an amount different than I authorized.

[#1] My card has been charged for the transaction listed above, but I have not received the $200.5 merchandise or service I expected to receive. Linda View Miller Star F 150 rental the merchant on #1 2/2012. I contacted the merchant on 1/15/13, and their response was To contact the Bank the card came from.

_____ This matter has not been resolved.

[#1] The merchant promised me a refund credit for the listed charge, but it has not yet appeared on my card. A copy of the refund documentation is enclosed. (If store credit, send copy of sales slip and credit slip. Specify the reason for not using store credit. The merchant said they refunded the money on 12-25-2012 but my account does not have a record of it being deposited. the day they gave me was $200.5 PM for the payment record

[ ] I have been charged the wrong amount. Enclosed is a copy of my sales draft showing the amount for which I signed. My receipt shows $[redacted], however I was billed $_____

[ ] My card number was used to secure this purchase; however the final payment was made by check, cash, or another credit card. Enclosed is my receipt, canceled check (front and back), copy of credit card statement, or applicable documentation demonstrating that payment was made by other means.

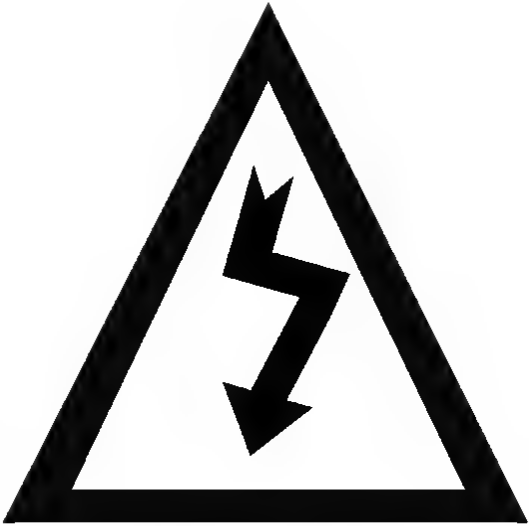
ATION REPORT

TIME 09.28.2017 09:11
DEP.# 834704889

DATE,TIME
FAX NO./NAME
DURATION
PAGE(S)
RESULT
MODE

[redacted]
09.28 09
OK
CHECK FAX #
SEND AGAIN
STANDARD

BUSY BUSY/NO



# DANGER 45

www.FuckTrumpkins.com

# Big Zack's Tire Shack

"Home of the Big Chrome"

1 7 1 Ranch
Tiller, , 7 765 1
(25 ) 634 2746 (Office)
25 ) 634- 753 (Fax)

## *FAX COVER SHEET*

TO:

Fax Toy

FAX NUMBER:

PHONE NUMBER

RE:

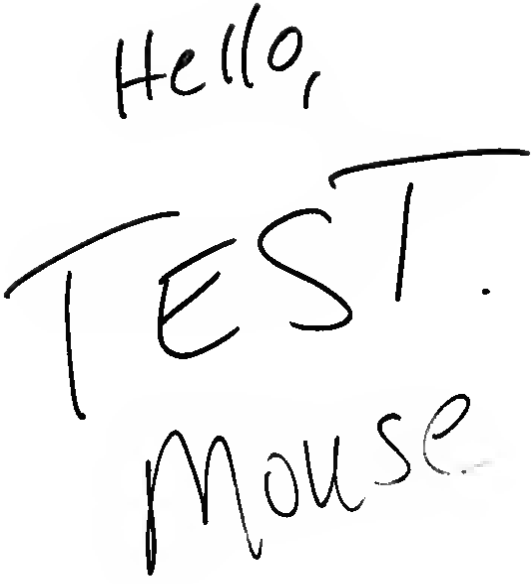
O \ RGENT O FOR YOUR REVIEW O PLEASE COMMENT O PLEASE REPLY

*NOTES*

| Test Code | Test Name | Date | Result | Pass To Sort |
|---|---|---|---|---|
| 4103 | [illegible] | [illegible] | [illegible] | [illegible] |

30016

-2-


Hello,
TEST.
Mouse

# Fax Message

**Date** 13 D 201 **Time:** 20 5 37

**To** Chan Ai min

**Company**

**Fax Number** 00 6132101130

**From**

**Subject:** Test

**Total Number of Pages (including cover):** 1

**Memo** This is a test message

FaxTalk Trial Version

OSfren
Dental

# Windows Printer Test Page

Congratulations!

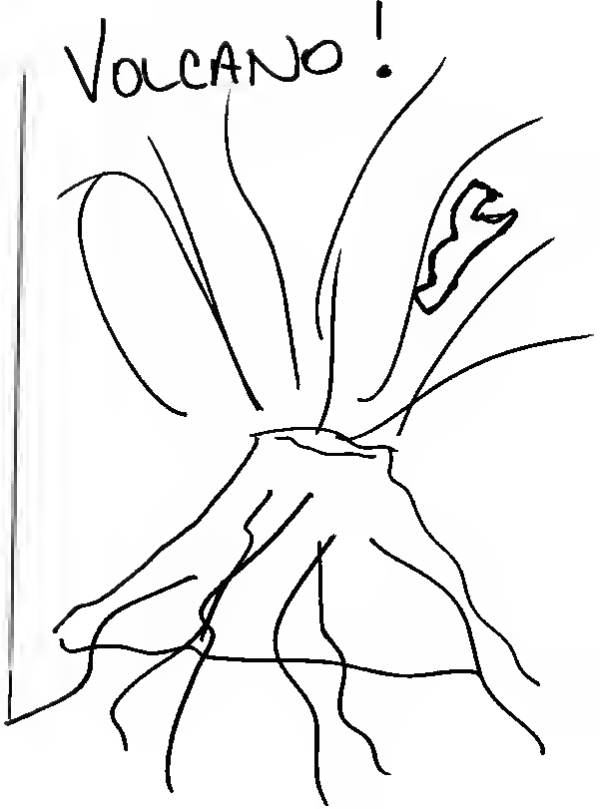
If you can read this information, you have correctly installed your Dell Laser MFP 1600n on TOUCH

The information below describes your printer driver and port settings

```
Submitted Time      5:35:58 PM 6/20/2012
Computer name       TOUCH
Printer name        Dell Laser MFP 1600n
Printer model       Dell Laser MFP 1600n
Color support       Yes
Port name(s)        192.168.1.65
Data format         RAW
Share name          Dell Laser MFP 1600n
Location            Office
Comment
Driver name         DELR1.DLL
Data file           DELR1pp.dll
Config file         DELR1du.DLL
Driver version      4.00
Environment         Windows x64
Monitor             DELR1 Langmon

Additional files used by this driver
 C:\Windows\system32\spool\DRIVERS\x64\3\DELR1u.DLL
 C:\Windows\System32\spool\DRIVERS\x64\3\DELR1u2.DLL
 C:\Windows\system32\spool\DRIVERS\x64\3\DELR1o.DLL
 C:\Windows\system32\spool\DRIVERS\x64\3\DELR1cm.dll        (0.5.2.0)
 C:\Windows\system32\spool\DRIVERS\x64\3\DELR1lf.DLL
 C:\Windows\system32\spool\DRIVERS\x64\3\DELR1um.dll        (0.3.47.0)
 C:\Windows\system32\spool\DRIVERS\x64\3\DELR1um.xml
 C:\Windows\system32\spool\DRIVERS\x64\3\DELR1cm.ctd
 C:\Windows\system32\spool\DRIVERS\x64\3\DELR1pp.VER
 C:\Windows\system32\spool\DRIVERS\x64\3\DELR1u.ini
 C:\Windows\system32\spool\DRIVERS\x64\3\DELR1ud.bmp
 C:\Windows\system32\spool\DRIVERS\x64\3\DELR1ue.bmp
 C:\Windows\system32\spool\DRIVERS\x64\3\DELR1ul.bmp
 C:\Windows\system32\spool\DRIVERS\x64\3\DELR1u.BMP
 C:\Windows\system32\spool\DRIVERS\x64\3\DELR1ul.BMP
 C:\Windows\system32\spool\DRIVERS\x64\3\DELR1en.DAT
 C:\Windows\system32\spool\DRIVERS\x64\3\DELR1fn.DAT
 C:\Windows\system32\spool\DRIVERS\x64\3\DELR1gr.DAT
 C:\Windows\system32\spool\DRIVERS\x64\3\DELR1lt.DAT
 C:\Windows\system32\spool\DRIVERS\x64\3\DELR1sp.DAT
 C:\Windows\system32\spool\DRIVERS\x64\3\DELR1en.CHM
 C:\Windows\system32\spool\DRIVERS\x64\3\DELR1fn.CHM
 C:\Windows\system32\spool\DRIVERS\x64\3\DELR1gr.CHM
 C:\Windows\system32\spool\DRIVERS\x64\3\DELR1lt.CHM
 C:\Windows\system32\spool\DRIVERS\x64\3\DELR1sp.CHM

This is the end of the printer test page
```


VOLCANO!

Test

H.AD

2306

TEST

1

# Windows Printer Test Page

Congratulations!

If you can read this information, you have correctly installed your Lexmark 5600-6600 Series on OWNER-PC.

The information below describes your printer driver and port settings.

```
Submitted Time      11:37:53 AM 7/14/2016
Computer Name       OWNER-PC
Printer Name        Lexmark 5600 6600 Series (USB)
Printer Model       Lexmark 5600 6600 Series
Color Support       Yes
Port Name(s)        USB001
Data Format         EMF
Share Name
Driver Name         lxdude.dll
Data File           lxdupmc.dll
Config File         lxdupmc.dll
Help File           lxdupmc.chm
Driver Version      3.64.2.40
Environment         Windows x64
Monitor             5600-6600 Series Port

Additional Files used by this driver:
C:\Windows\System32\spool\DRIVERS\x64\3\lxdububl.dll
C:\Windows\System32\spool\DRIVERS\x64\3\lxducats.dll        (1, 0, 0, 1)
C:\Windows\System32\spool\DRIVERS\x64\3\lxducfg.dll         (1, 0, 0, 1)
C:\Windows\System32\spool\DRIVERS\x64\3\lxducfg.eml
C:\Windows\System32\spool\DRIVERS\x64\3\lxducfgx.exe
C:\Windows\System32\spool\DRIVERS\x64\3\lxduclrl.lut
C:\Windows\System32\spool\DRIVERS\x64\3\lxduclr2.lut
C:\Windows\System32\spool\DRIVERS\x64\3\lxduclr3.lut
C:\Windows\System32\spool\DRIVERS\x64\3\lxducpy4.lut
C:\Windows\System32\spool\DRIVERS\x64\3\lxducsma.dll        (3-583.0.0)
C:\Windows\System32\spool\DRIVERS\x64\3\lxducu.dll          (6.104.29.0)
C:\Windows\System32\spool\DRIVERS\x64\3\lxducub.dll         (6.164.29.0)
C:\Windows\System32\spool\DRIVERS\x64\3\lxducur.dll         (6.104.29.0)
C:\Windows\System32\spool\DRIVERS\x64\3\lxdudtsr.dll        (99.99.99.99)
C:\Windows\System32\spool\DRIVERS\x64\3\lxdudru.dll         (6.71.0.0)
C:\Windows\System32\spool\DRIVERS\x64\3\lxdudtst.bmp
C:\Windows\System32\spool\DRIVERS\x64\3\lxdudtst.jpg
C:\Windows\System32\spool\DRIVERS\x64\3\lxdueqf.dll         (7.4)
C:\Windows\System32\spool\DRIVERS\x64\3\lxdugf.dll          (6.00.8063.0)
C:\Windows\System32\spool\DRIVERS\x64\3\lxduhcp.dll         (8.4.28.0)
C:\Windows\System32\spool\DRIVERS\x64\3\lxduhpmc.dll        (4.71.0.0)
C:\Windows\System32\spool\DRIVERS\x64\3\lxduibuf.dll
C:\Windows\System32\spool\DRIVERS\x64\3\lxduins.dll         (6.104.29.0)
C:\Windows\System32\spool\DRIVERS\x64\3\lxdujnsb.dll        (6.104.29.0)
C:\Windows\System32\spool\DRIVERS\x64\3\lxdujnsr.dll        (6.104.29.0)
C:\Windows\System32\spool\DRIVERS\x64\3\lxdujsw.loc
C:\Windows\System32\spool\DRIVERS\x64\3\lxdujswb.dll        (6.104.29.0)
C:\Windows\System32\spool\DRIVERS\x64\3\lxdujswe.dll        (6.104.29.0)
C:\Windows\System32\spool\DRIVERS\x64\3\lxdujswr.dll        (6.104.29.0)
C:\Windows\System32\spool\DRIVERS\x64\3\lxdujswx.exe        (3.583.0.0)
C:\Windows\System32\spool\DRIVERS\x64\3\lxdulpa.dll         (6.104.29.0)
C:\Windows\System32\spool\DRIVERS\x64\3\lxdulnks.dll        (1.0.0.1)
C:\Windows\System32\spool\DRIVERS\x64\3\lxdulpab.dll        (6.164.29.0)
```

Date/Time: Dec 3, 2014 9:01AM

| File Number | Mode | Destination | Pg(s) | Result | Page Not Sent |
|---|---|---|---|---|---|
| 1463 | Memory TX | 9185953361239 | P. 1 | OK | |

Reason for error
E-1) Hung up or line fail
E-2) No answer
E-3) No facsimile connection

855 330 1239

CP

**MARTHA MOORE**
95 CHIPPEWA TRAIL
GREENWOOD, ARKANSAS 72936-4414
FAX 479.998 1414 *** CELL 559 300 0643

June 14, 2018

| | |
|---|---|
| To | Office of the State Treasurer |
| Fax | 702 486 4177 |
| Pages | Three (3) plus this cover sheet |
| Attn. | Unclaimed Property Staff |
| Re | Martha Lee Huff (Bonnar Moore) |
| Claim No | 5449014 |

Dear Staff:

Here are copies of information obtained from familysearch.org confirming address as noted: 1500 Stardust Rd. #J3163 Las Vegas Nevada 89109. At that time, I lived at the Budget Suites on Stardust Rd., and worked across the street at the Frontier Hotel & Casino in the Keno Department.

Recently I drove through the area and I see the Budget Suites and Frontier Hotel & Casino are no longer there. They Tore Down Paradise to Build a Parking Lot. I guess I will send a copy of this by regular mail as well.

Thank you for your assistance with this matter.
Martha Moore
559 300 0643

Enclosures: Nevada Marriage Index; United States Public Records; Correspondence

mlm

If you receive this fax in error, please destroy all documents and contact me at 559 300 0643. Thank you for your assistance.

# Implementation delivery methodology

Pegasystems recommends that you use an Agile delivery model, more specifically a Scrum-based standard for a Pega application implementation. In the rare cases where a more waterfall -based implementation methodology is better suited, Pegasystems recommends that you use an Iterative Waterfall delivery process. These two implementation methodologies help break down the work into a manageable scope of work that can be delivered into production faster. The Pegasystems delivery approach has two or many stages.

- Initiate
- Delivery

## Initiate stage

In the Initiate stage, the implementation teams build out the foundation or baseline of the application and prepare for the work that is necessary to configure the first production release and subsequent extension releases. Building a strong foundation to support expansion and reuse is core to the success of an implementation.

The Initiate stage is further organized into three sub-stages:

**Plan**

Align the vision and roadmap to establish the foundation for the implementation. High-level tasks include:

- Defining the production release milestone
- Refining scope alignment
- Determining the implementation methodology

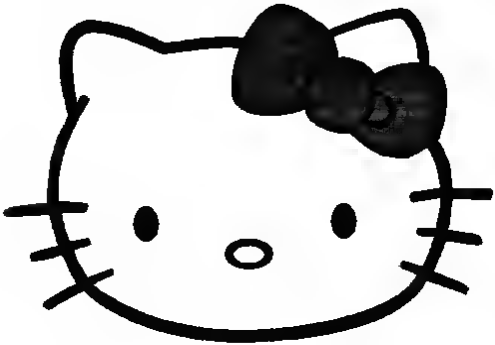
**Setup**

Validate and review the Pega provided features and capabilities with customer requirements and expectations. Tasks include:

- Establishing environments and processes
- Creating the baseline application
- Loading sample data
- Demonstrating the baseline application

10am [illegible]
saheta u 5 do 5 15AM chtanooga
petak 5 45PM jodiat
4 45Pm cervrrak, alaip

I didn't say it was your fault. I said I was going to blame you.



H. E!

Thu Jan 2 19:48:21 2014 plugoff 0 Device C016 046D 6&160E7025&0&2
Thu Jan 2 19:48:32 2014 plugoff 1 Device 3437 08E6 5&1EEC65D3&0&2
Thu Jan 2 19:48:32 2014 plugoff 2 Device 2010 413C 6&160E7025&0&1
Sat Jan 4 21:19:00 2014 plugoff 0 Device C016 046D 6&160E7025&0&2
Sat Jan 4 21:19:06 2014 plugoff 1 Device 3437 08E6 5&1EEC65D3&0&2
Sat Jan 4 21:19:21 2014 plugoff 2 Device 2010 413C 6&160E7025&0&1
Wed Jan 8 20:21:16 2014 plugoff 0 Device C016 046D 6&160E7025&0&2
Wed Jan 8 20:21:16 2014 plugoff 1 Device 3437 08E6 5&1EEC65D3&0&2
Wed Jan 8 20:21:16 2014 plugoff 2 Device 2010 413C 6&160E7025&0&1

you hp

FaxBack System Test

B [illegible] to choose hp

## Other useful hp web sites

**www.hp.com/register**
Use this web address to register your HP product.

**www.hp.com/support**
Use this web address to obtain additional support for your product.

**www.hpshopping.com**
Use this web address to order supplies and accessories for your [illegible] product.

## Help us help you

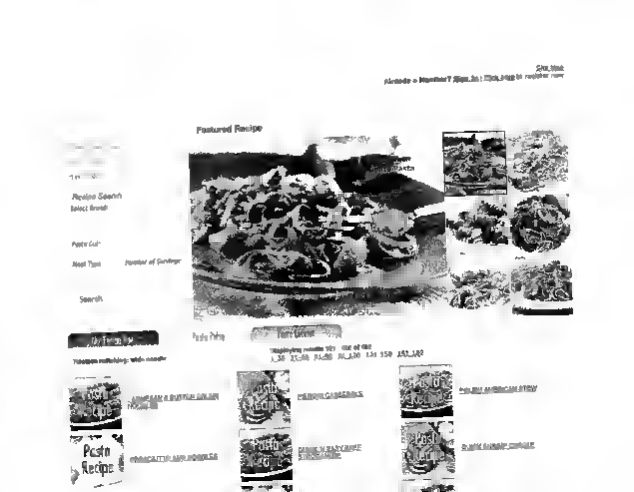
We're interested in your feedback on this fax verification process. Send your comments to:

fax.feedback@hp.com

hp
invent

[illegible]
www.hp.com

C
CJD
TEST


Featured Recipe
Pasta Search
Select Brand
Pasta Cut
Meal Type
Number of Servings
Search
Pasta Recipe
Pasta Recipe
Pasta Recipe
Pasta Recipe
Pasta Recipe
Pasta Recipe

FORGEVERD

MAELSTROM
MARK X

OPERATOR'S MANUAL

## Model

MAELSTROM
MARK X

POWER One MAELSTROM

OUTPUT Maximum 800 Lumens
Low, 4 Lumens

RUNTIME Moderate to High
Low 2 hours

## Operation

The Forge MARK X is a rechargeable, multi-purpose and versatile work flashlight in the Maelstrom Revision. You will easily charge and navigate the flashlight according to your application.

CHARGING INSTRUCTIONS
To charge the MARK X, unscrew the USB cover situated on the rear of the flashlight. Connect the flashlight to the included USB charging cable. Connect the other end of the cable to any USB power source (computer, USB wall charger, etc.). The MARK X will turn on and begin charging. When the MARK X is fully charged it will switch off and the LED will turn green.

CHARGING WARNINGS
While you are charging the MARK X, it is strongly advised that you:
Charge in a well ventilated area.
Keep away from flammable materials.
Avoid charging in direct sunlight or in high temperature environments.
Do not charge the MARK X if it is damaged in any way.
Do not charge the MARK X if the battery is leaking or has a foul odor.
Do not charge the MARK X if the battery is swollen or deformed.
Do not charge the MARK X if the battery is cracked or broken.
Do not charge the MARK X if the battery is exposed to water or other liquids.
Do not charge the MARK X if the battery is exposed to fire or extreme heat.
Do not charge the MARK X if the battery is exposed to extreme cold.
Do not charge the MARK X if the battery is exposed to extreme pressure.
Do not charge the MARK X if the battery is exposed to extreme vibration.
Do not charge the MARK X if the battery is exposed to extreme shock.
Do not charge the MARK X if the battery is exposed to extreme electrical interference.
Do not charge the MARK X if the battery is exposed to extreme magnetic fields.
Do not charge the MARK X if the battery is exposed to extreme radiation.
Do not charge the MARK X if the battery is exposed to extreme chemicals.
Do not charge the MARK X if the battery is exposed to extreme biological agents.
Do not charge the MARK X if the battery is exposed to extreme nuclear agents.
Do not charge the MARK X if the battery is exposed to extreme weapons of mass destruction.
Do not charge the MARK X if the battery is exposed to extreme terrorist activities.
Do not charge the MARK X if the battery is exposed to extreme natural disasters.
Do not charge the MARK X if the battery is exposed to extreme man-made disasters.
Do not charge the MARK X if the battery is exposed to extreme accidents.
Do not charge the MARK X if the battery is exposed to extreme incidents.
Do not charge the MARK X if the battery is exposed to extreme emergencies.
Do not charge the MARK X if the battery is exposed to extreme crises.
Do not charge the MARK X if the battery is exposed to extreme disasters.
Do not charge the MARK X if the battery is exposed to extreme catastrophes.
Do not charge the MARK X if the battery is exposed to extreme calamities.
Do not charge the MARK X if the battery is exposed to extreme tragedies.
Do not charge the MARK X if the battery is exposed to extreme misfortunes.
Do not charge the MARK X if the battery is exposed to extreme mishaps.
Do not charge the MARK X if the battery is exposed to extreme accidents.
Do not charge the MARK X if the battery is exposed to extreme incidents.
Do not charge the MARK X if the battery is exposed to extreme emergencies.
Do not charge the MARK X if the battery is exposed to extreme crises.
Do not charge the MARK X if the battery is exposed to extreme disasters.
Do not charge the MARK X if the battery is exposed to extreme catastrophes.
Do not charge the MARK X if the battery is exposed to extreme calamities.
Do not charge the MARK X if the battery is exposed to extreme tragedies.
Do not charge the MARK X if the battery is exposed to extreme misfortunes.
Do not charge the MARK X if the battery is exposed to extreme mishaps.

## Operation

Do not operate the flashlight if the battery is damaged in any way.
Do not operate the flashlight if the battery is leaking or has a foul odor.
Do not operate the flashlight if the battery is swollen or deformed.
Do not operate the flashlight if the battery is cracked or broken.
Do not operate the flashlight if the battery is exposed to water or other liquids.
Do not operate the flashlight if the battery is exposed to fire or extreme heat.
Do not operate the flashlight if the battery is exposed to extreme cold.
Do not operate the flashlight if the battery is exposed to extreme pressure.
Do not operate the flashlight if the battery is exposed to extreme vibration.
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Do not operate the flashlight if the battery is exposed to extreme electrical interference.
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Do not operate the flashlight if the battery is exposed to extreme radiation.
Do not operate the flashlight if the battery is exposed to extreme chemicals.
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Do not operate the flashlight if the battery is exposed to extreme terrorist activities.
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Do not operate the flashlight if the battery is exposed to extreme man-made disasters.
Do not operate the flashlight if the battery is exposed to extreme accidents.
Do not operate the flashlight if the battery is exposed to extreme incidents.
Do not operate the flashlight if the battery is exposed to extreme emergencies.
Do not operate the flashlight if the battery is exposed to extreme crises.
Do not operate the flashlight if the battery is exposed to extreme disasters.
Do not operate the flashlight if the battery is exposed to extreme catastrophes.
Do not operate the flashlight if the battery is exposed to extreme calamities.
Do not operate the flashlight if the battery is exposed to extreme tragedies.
Do not operate the flashlight if the battery is exposed to extreme misfortunes.
Do not operate the flashlight if the battery is exposed to extreme mishaps.

## Specifications

Dimensions
Length: 2.47 in
Diameter: .94 in
Weight: 3.28 oz

Power Details
Li-ion 18650 rechargeable battery
Charging time: 2 hours
Runtime: Range 1.5–6.5 hr

Typical Output and Runtime

| Mode | Output (Lumens) | Runtime |
|---|---|---|
| Moonlight | 1 lumen | 100 days |
| Low | 25 lumens | 30 days |
| High | 150 lumens | 3 hours |
| Max | 800 lumens | 1 hours |
| Strobe | | 2 hours |
| S.O.S. | | 4 hours |
| Beacon/Night | | 2 days |
| Medium/Low | | 60 hours |

Beacon mode emits a 1 second flash every 5 seconds.
Strobe mode flashes at 10 Hz.
S.O.S. mode flashes in the Morse code pattern for "SOS".

## Warranty

The MAELSTROM MARK X is backed by a 5 year limited warranty against defects in materials and workmanship. This warranty does not cover damage caused by misuse, abuse, accidents, or normal wear and tear. This warranty does not cover damage caused by unauthorized modifications or repairs. This warranty does not cover damage caused by exposure to extreme temperatures or pressures. This warranty does not cover damage caused by exposure to corrosive substances. This warranty does not cover damage caused by exposure to radiation. This warranty does not cover damage caused by exposure to biological agents. This warranty does not cover damage caused by exposure to chemical agents. This warranty does not cover damage caused by exposure to nuclear agents. This warranty does not cover damage caused by exposure to weapons of mass destruction. This warranty does not cover damage caused by exposure to terrorist activities. This warranty does not cover damage caused by exposure to natural disasters. This warranty does not cover damage caused by exposure to man-made disasters. This warranty does not cover damage caused by exposure to accidents. This warranty does not cover damage caused by exposure to incidents. This warranty does not cover damage caused by exposure to emergencies. This warranty does not cover damage caused by exposure to crises. This warranty does not cover damage caused by exposure to disasters. This warranty does not cover damage caused by exposure to catastrophes. This warranty does not cover damage caused by exposure to calamities. This warranty does not cover damage caused by exposure to tragedies. This warranty does not cover damage caused by exposure to misfortunes. This warranty does not cover damage caused by exposure to mishaps.

Forge Industries, LLC
5147 Maelstrom Industrial Drive
Tempest, TN 37601
(615) 555-0199
customerservice@forgeindustries.com
www.FORGEINDUSTRIES.com

1-213-294-2943

Test

Fax

18553301239

**DUMMY FAX DOCUMENT**

**NO CONTENT HERE**

# CANCELLATION

Thursday, March 05, 2015

To: The Bath BRAND BEAR - MI HOTEL SUITES
Fax: +1(855)-835-1239
Attn: Ajesh Chandran
Subject: Cancellation Confirmation

| Confirmation Number |
| --- |
| C2014C08-411 265 |
| Created: 2014-08-08 13:51:14 GMT |
| Fax Source: STANDALONE |

Dear Ajesh Chandran,

We have received the following cancellation notification for your hotel property. Please review the information below and confirm receipt of this cancellation notification by email or phone. Please contact us if there are any discrepancies in the information below.

Thank you,
Hotel Partner

| Guest Name: | | | |
| --- | --- | --- | --- |
| Number of Rooms: | 1 | Number of Nights: | 1 |
| Check In: | April 27, 2015 | Check Out: | April 28, 2015 |

| Guest Name: | | | |
| --- | --- | --- | --- |
| First Name: | Sunny | Last Name: | Patwa |

| Credit Card Number: | | |
| --- | --- | --- |
| Expiration Date: | | April 27 |
| Room Rate: | | $98.80 |

Sub-Total: $27.80
Tax & Fees: $2.80 Total: $33.60

Room Rate includes Two Persons Child free

AVERY®

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## Basic Printing Tips

For detailed printing tips for your product, visit: **avery.com/printingtips**

- Adjust printer settings for "Paper Type" to "Labels" to optimize print quality
- Check the alignment of your printed layout by first printing on a plain sheet of paper. Hold the printed sheet behind the Avery product to check the alignment of your layout. When satisfied with the layout, print onto the Avery product.

*Note: Avery labels with TrueBlock™ Technology are opaque. If you have purchased these labels, compare your plain sheet of paper side by side with the Avery labels with TrueBlock™ Technology.*

- When printing label products, do not feed labels through your printer more than once. The Avery satisfaction guarantee extends only to a sheet of labels that has been fed through a printer a single time.
- Use only Avery brand products for guaranteed results.

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  *Download blank & pre-designed templates for easy formatting and printing.*
- **Avery Wizard for Microsoft® Word**
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- **Avery Design & Print Online**
  *Create and print online easily with PC and Mac® systems. Installing new software is not required.*
- **Avery DesignPro® Software**
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You can receive templates by e-mail. Send an e-mail to **templates@averyclennison.com** with the Avery product number in the subject line. Do not type anything in the message area.

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Para consejos detallados de cómo imprimir visite la sección Ayuda de nuestra página web **avery.com.mx**

- Seleccione "Etiquetas" dentro de las opciones de "Tipo de Papel" para optimizar la calidad de impresión.
- Revisa la alineación de tu documento haciendo una prueba en una hoja en blanco. Sostén la hoja detrás del producto Avery para verificar la impresión. Una vez comprobada, imprime directamente en el producto Avery.

*Nota: Las etiquetas Avery con Tecnología TrueBlock™ tienen respaldo opaco. Si estás utilizando estas etiquetas, compara la prueba de impresión colocándola frente un lado de las etiquetas Avery con Tecnología TrueBlock™.*

- No utilices la hoja de etiquetas en la impresora más de una vez. La Garantía de Satisfacción Avery sólo se extiende a hojas de etiquetas que han pasado por la impresora una sola vez.
- Utiliza solamente productos Avery para resultados garantizados.

## Visita avery.com.mx e identifica la página web de tu país para más información.

- **Plantillas Avery**
  *Descarga Plantillas en Blanco y Pre-diseñadas para Microsoft® Word y edita e imprime fácilmente.*
- **Avery Wizard para Microsoft® Word**
  *Ahorra tiempo con la guía paso a paso.*
- **Software Avery DesignPro®**
  *Máxima creatividad en Software para sistemas PC y Mac®.*

| | |
|---|---|
| **México y Centro América** | 01.800.52.00379<br>52.55.5089 30.100 |
| **Caribe y Venezuela** | (787) 753.3135 |
| **Argentina** | 0800.777 2837 |
| **Chile** | 800.83.5105 |
| **Resto de Sud America** | ddistancia@averyclennison.com |

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Educational Hx. College Graduate
Psychosocial History

Number of siblings: 2 SISTERS

**Allergies**
3 4 Dihydroxyphenylethanol

**Current Medications**
Actos 45 mg Tablet Take 1 Tablet Oral qd (every day) for 10 days
aspirin 500 mg Tablet Take 1 Tablet Oral qd (every day) for 10 days (Provider: Gobind Garg, MD)

**CLINICAL DOCUMENTATION IMPROVEMENT ALERT**
**Physical Exam**
HENT

Throat Tonsils are Throat is red

**Immunization Hx**
Series DTaP / 1
Series Fluzone - Flu Vaccine
Series Fluzone - Flu Vaccine 1 (09/19/2017) (Administered Yes)
Series Fluzone - Flu Vaccine 1
Series Pneumonia (10/25 2012) (Administered, Yes)
Series TB Tine Test (10/02/2013) (Administered, Yes)

---

Gobind Garg, MD

TEST
FAX

# FAX

Recipient: 1 - Fax Test Site

Sender: Luigi Sportini

Address

FAX: 18553301239

TEL:

FAX:

Number of Sheets: 1 page(s) including cover

Date: Monday, February 12, 2018

Subject: test

test

## CANA WINE CLUB APPLICATION

| | |
|---|---|
| Name | Date of Birth |
| Spouse's Name (if joint membership) | |
| E-mail | Phone |
| Billing Address | |
| City | State / ZIP Code |
| Shipping Address | |
| City | State / ZIP Code |
| This address is a: | ☐ Residence ☐ Business (please print) |
| Delivery | ☐ I will pick up my wines ☐ Please ship my wines |
| Membership | ☐ *Connoisseur* (2 bottles/shipment) ☐ *Cellar Master* (6 bottles/shipment) ☐ *Sommelier* (4 bottles/shipment) |
| Charge to: | ☐ Visa ☐ MasterCard ☐ American Express ☐ Discover |
| Name (as printed on the credit card) | |
| Card Number | Exp. Date |

_____ (Initials) By signing this form, I agree to have my credit card charged for my bi monthly wine.

_____ (Initials) I understand that if I am unable to pick up my wine prior to the next club processing my club wines will be shipped to me at my expense using the credit card and delivery address on file with Cana Vineyards and Winery.

_____ (Initials) I understand that upon delivery an adult signature is required. I am responsible for all cost incurred if my wine shipment is returned to the winery and for reshipment.

| | |
|---|---|
| Signature of Applicant | Date |
| Referred by | |
| Office Use Only | _____ (Initials) The credit card information matches the applicant's credit card.<br>_____ (Initials) I verify that I can read all the information on this application. |

This product is not for children 3 years and younger due to potential choking hazards. Hook contains functional sharp point. Do not wear bracelet around neck. Always make sure wearable is loose enough to wear. Do not wear it if skin develops redness. Visit physician if symptom persists or worsen.

## Warning for Looms extension:

Use extra caution removing rubber bands from the loom. Rubber bands under tension can generate high force. Unhook the rubber bands from the adjacent pin to the next. Please visit www.rainbowloom.com/instruction.html.

## Keep things tidy :)

Please keep rubber bands, looms, and hook back in the box after using. Have a fun and safe experience using Rainbow Loom®!!

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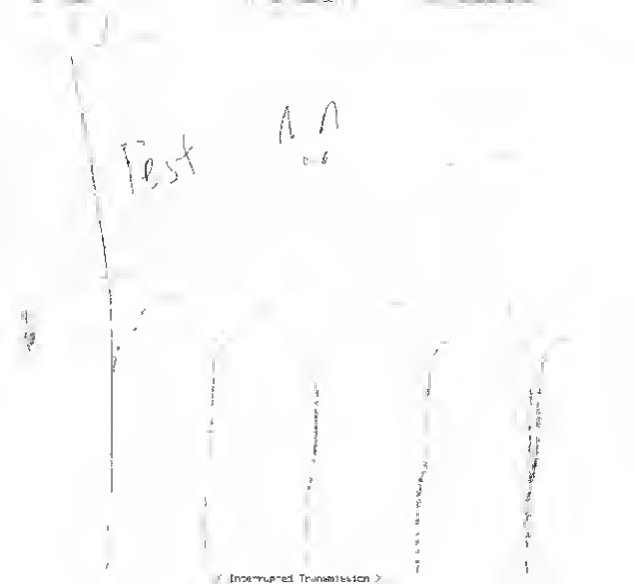
Bill Dorff

This is a test of my fax mach ne\\

Signature


Test
A.D.
(Intermuted Transmission)

HRF-001 10/13

kynect

Steven L. Beshear
Governor

Carrie Banister
Commissioner

Audrey Tayse Haynie
Secretary

Kentucky Health and Family Services
Office of the Kentucky Health Benefit Exchange

DATE November 06, 201
CASE NUMBER: [redacted]

[redacted]

AKANKSHA DHAKAL
4407 KERN CT APT 4
LOUISVILLE KY 402 8-3953

## We Need Information

Your request for more time to provide the information we asked for was given. Send us this information by the date(s) listed below.

More information is needed to determine your household's eligibility and benefits as shown below. If the information is not received by the date(s) listed below, your benefits may be denied, changed, or stopped.

| Program | Financial Assistance Program | | |
|---|---|---|---|
| **Who?** | **What information is needed?** | **When due?** | **What is accepted as proof?** |
| AAKRITI DHAKAL | [redacted] | 02/16/2016 | Award Letter<br>Court Documents<br>Employer Statement<br>Income Tax Return<br>Letter from Tribe about Income<br>Loan Contract<br>OTHER<br>Trust<br>Wage Stubs<br>Written Income Statement<br>Written Statement for Income or No Income |

If you have questions, go to kynect.ky.gov or call us at 1-855-4kynect (459-6328).

You may upload the documents we need on the Self-Service Portal of the KHBE website, bring them to your local office, or fax the documents to us at [redacted]

This is a test.

TEST

This is a test document

Wednesday October 23, 2024

8:14 AM

Test document

Test document

Test document

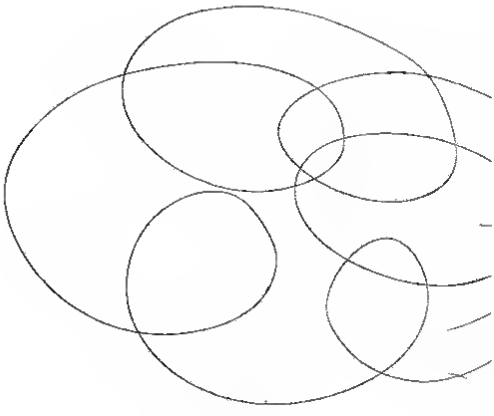
Paint
Brush
Matching
www.confessionsofahomeschooler.com

FAX TEST

1/25/2014

2:55 PM

AL



# af FAX

TO

FAX

DATE

FROM

# OF PAGES

NOTES

autodesk 150 M ERRISPP ST SAN FRANCISCO CA 94107 TEL 415 701 8700

TEST

The following describes separate terms for Blueprint payment plans we may offer you, and are not part of your Cardmember Agreement.

**PAYMENT OFFER — PURCHASE APR AND SPLITS**

This Section explains our Finish It and Split plans, which apply if offered to you and you accept it.

Finish It lets you select a portion of your balance. Split lets you select a specific purchase. For both, you can establish payments to pay off ahead of your regular schedule. We call both these features your Plan.

The amount of the payments you establish under your "Plan Payment" will be shown on your monthly statement. It is separate from your required Minimum Payment.

Your Plan Payment will be included in your "Blueprint Payment". This will also be shown on your monthly statement. The Blueprint Payment also includes your required Minimum Payment amount. The actual required Minimum Payment will be shown on your monthly statement. Making your full Blueprint Payment will satisfy your required Minimum Payment.

These Plans are optional features of your Account. You must make your required Minimum Payment by its due date. However, not making your Blueprint Payment will not put your account in default. If you do not pay enough to satisfy at least your required Minimum Payment, your Account will be in default. Then, we may take any of the Actions explained in this Agreement.

**Interest Charges associated with your Plan Balance(s) will be limited the same way as those for the category of interest from which you selected your Plan Balance(s).**

Even if you make your required Minimum Payment, we will remove your Plan from your Account if you (i) not make at least half of your Plan Payment (a) for 2 months in a row or (b) for any 3 months in a rolling 6 month period. Also, if you ask us to, we will remove the Plan from your Account. If your Account is in default, the Plan may be removed from your Account.

If a Plan is removed from your Account, your Plan Balance(s) will move to the category of balances from which you selected your Plan Balance(s). They will be treated as those balances for all purposes.

If there are balances on your selected with a higher Annual Percentage Rate than your Plan Balances, generally we will credit payments over the required Minimum Payment to balances with the highest rates first. We will then credit lower rate balances in descending order of the value of those rates. This may affect the amount of any payment to be made to Plan Balance(s).

**PAYMENT OFFER — FULL PAY**

This Section explains our Full Pay plan, which applies if it is offered to you and you accept it.

The Full Pay feature lets you select one or more types of Purchases to be separated out on your monthly statement. You can pay these in full every month. The total of the types of purchases you pick is called your Full Pay Balance.

The amount of the Full Pay fee does is determined at the end of each billing cycle. It is separate from your required Minimum Payment.

The Full Pay Balance amount will be included in your "Blueprint Payment". This will also be shown on your monthly statement. The Blueprint Payment also includes your required Minimum Payment amount. The actual required Minimum Payment on your Account will continue to be shown on your monthly statement. Making your full Blueprint Payment will satisfy your required Minimum Payment.

If you do not pay enough to satisfy your Blueprint Payment by its due date, interest on the amount Full Pay Balance will be charged. This interest will start on the first day of the billing cycle in which you did not make your payment. As long as you make your regular required Minimum Payment by its due date and making your Blueprint Payment will not put your Account in default.

In which Charges are not calculated on your Full Pay Balance as long as you are active in the Blueprint plan and pay your Blueprint Payment in full by your payment due date.

If you do not pay your full Blueprint Payment by you explore due date for 3 months in a row we may remove the Plan from your Account. Also if you tell us to, we will remove the Plan from your Account. If your Account is in default for any of the reasons stated in this Agreement, we may remove the Plan from your Account.

If a Plan is removed from your Account the unpaid Full Pay Balance will be treated the same as Purchases. We will apply the Purchase APR interest rate on the unpaid Full Pay Balance beginning the 1st day of the cycle in which the Plan was removed.

Generally we will credit payments over the required Minimum Payment for your Account to balances with the highest rates first. We will then credit lower rate balances in descending order of the value of those rates. This may affect the amount of any payment to be applied to Full Pay Balance(s).

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